

UNITED STATES DISTRICT COURT  
DISTRICT OF MASSACHUSETTS

CIVIL ACTION No. 05-11454 RGS

_____	)
JOSEPH H. KORAN, and KIMBERLY KORAN,	)
Individually and on Behalf of ANA KORAN,	)
JOSEPH KORAN, JR. and ERIK KORAN, Minors,	)
Plaintiffs,	)
v.	)
_____	)
ELIZABETH WEAVER and	)
TOWN OF SHERBORN,	)
Defendants.	)
_____	)

**MEMORANDUM OF LAW IN SUPPORT OF  
DEFENDANT, TOWN OF SHERBORN'S MOTION FOR SUMMARY JUDGMENT**

**I. FACTUAL AND PROCEDURAL BACKGROUND**

The plaintiff brought this state-law negligence claim against Sherborn under the Massachusetts Tort Claims Act [hereinafter "MTCA"], alleging bodily injury as a result of the defendant's negligence. Pl.'s Compl. The case is brought in this Court under a claim of diversity of citizenship. Id., p. 1. The plaintiff's wife Kimberly and his children Ana, Joseph, Jr. and/or Erik Koran [hereinafter referred to by first name or collectively as the "consortium plaintiffs"] all bring loss of consortium claims. Id., Counts Four, Eight, Nine & Ten.

This cause of action arises out of an incident that occurred on February 6, 2003 in Natick, Massachusetts. Pl.'s Compl., ¶¶ 8, 11 & 12. On that date, the plaintiff Joseph H. Koran [hereinafter "plaintiff"] called for emergency medical services after a motor vehicle accident with the co-defendant Elizabeth Weaver [hereinafter "Weaver"]. Id., ¶¶ 8-11. The defendant, Town of Sherborn [hereinafter "Sherborn"], dispatched two Sherborn Fire & Rescue Department [hereinafter "SFRD"] Emergency Medical Technicians [hereinafter "EMTs"] Scott Christensen

and Dominick Tolson to the scene via ambulance. Id., ¶ 11. The EMT's examined the plaintiff, strapped him into an ambulance cot in the back of their ambulance and transported him to Metro West Medical Center in Natick, Massachusetts for further medical attention. Id. According to all present, while the EMTs were removing the plaintiff from the ambulance at Metro West, the cot malfunctioned, causing it to drop from the height of the ambulance cargo floor to the ground. Ex. 1, pp. 55:6-8, 95-96; Ex. 2, pp. 35-36; Ex. 3, pp. 55-57; Ex. 4. The plaintiff claims injury to his back as a result of this incident. Pl.'s Compl.

The cot onto which the plaintiff was strapped is a 1997 Model 93ES Squadmate Ambulance Cot manufactured by Ferno-Washington. Ex. 6; Ex. 10, ¶ 3. Ferno-Washington's exclusive authorized repair company is Northeast EMS Enterprises, Inc. Ex. 7, p. 8:16-17. It is designed so that when the cot is pulled a certain distance from the ambulance during unloading, a lower sub-frame drops down to meet the ground, and automatically locks into place with the assistance of an auxiliary locking mechanism. Ex. 2, pp. 35-36; Ex. 3, pp. 55-57; Ex. 5, pp. 23-24; Ex. 6, p. 19; Ex. 7, pp. 32-33. The auxiliary lock mechanism has an "auxiliary lock lever" that automatically locks into place when the sub-frame descends, which the operator must manually disengage before the cot can be lowered back down into the "folded" position so that it can be loaded back into the ambulance. Ex. 7, pp. 39-40; Ex. 6, p. 15.

The evidence reveals that the cot's auxiliary locking mechanism failed due to damage to the auxiliary lock lever. Specifically, on February 7, 2003, the day after the incident in question, Deputy Chief John Dowse dismantled and inspected the cot and observed that the auxiliary lock lever was somehow bent and not engaging/disengaging properly. Ex. 5, pp. 12-14. This lever extends underneath the mattress and sub-frame of the cot, and only the very tip of the handle is visible from an operator's perspective. Ex. 6, pp. 7, 9 Figure D. After extensive discovery in the

case, absolutely no evidence has surfaced as to how the auxiliary lock lever was bent. Ex. 10, ¶ 7. The defendant denies knowing that the lever was bent at any time prior to Deputy Chief Dowse's inspection on February 7, 2003. Id., ¶ 6. A manufacturer-certified technician replaced the auxiliary lock lever on July 11, 2003, and has testified that a bent auxiliary lock lever would indeed cause the cot to malfunction in the manner described. Ex. 7, pp. 7-9, 16-17, 33-34. The lever was later replaced on July 11, 2003, and the cot has performed and continues to perform flawlessly ever since. Ex. 10, ¶ 8.

In fact, the cot had performed flawlessly from the time of its purchase new by the defendant in 1997 up until the incident of February 6, 2003. Ex. 5, pp. 38-39; Ex. 2, p. 39; Ex. 3, p. 87; Ex. 9, p. 20; Ex. 10, ¶ 3. Chief McPherson personally used the cot during a call on February 5, 2003, **the day before the incident**, and it performed as expected. Ex. 10, ¶ 5. The cot had also been routinely inspected by both the SFRD employees and the state licensing authority, and no problems were ever revealed. Ex. 10, ¶¶ 4, 9-11. Specifically, the cot was inspected weekly or more by SFRD staff, including one documented inspection on February 2, 2003, just four days prior to the incident in question, and no problems were ever noted. Ex. 5, pp. 20-21, 38-39; Ex. 11; Ex. 10, ¶¶ 4, 9 & 10. Similarly, the cot performed flawlessly during mandatory annual testing by the Massachusetts Department of Public Health (hereinafter "DPH") from 1997 through 2002. Ex. 5, p. 39; Ex. 12; Ex. 10, ¶¶ 4, 11.

## **II. STANDARD OF REVIEW**

"Summary judgment is appropriate when 'the pleadings, depositions, answers to interrogatories, and admissions on file, together with the affidavits, if any, show that there is no genuine issue as to any material fact and that the moving party is entitled to judgment as a matter of law.'" Barbour v. Dynamics Research Corp., 63 F.3d 32, 36 (1st Cir.1995) (quoting

FED.R.CIV.P. 56(c)). “To succeed [in obtaining summary judgment], the moving party must show that there is an absence of evidence to support the nonmoving party’s position.” Rogers v. Fair, 902 F.2d 140, 143 (1st Cir. 1990).

“Once the moving party has properly supported its motion for summary judgment, the burden shifts to the non-moving party, who ‘may not rest on mere allegations or denials of his pleading, but must set forth specific facts showing there is a genuine issue for trial.’” Barbour, 63 F.3d at 37 (quoting Anderson v. Liberty Lobby, Inc., 477 U.S. 242, 256 (1986)). “There must be ‘sufficient evidence favoring the nonmoving party for a jury to return a verdict for that party. If the evidence is merely colorable or is not significantly probative, summary judgment may be granted.’” Rogers, 902 F.2d at 143 (quoting Anderson, 477 U.S. at 249-50) (citations and footnote omitted). The Court must “view the facts in the light most favorable to the non-moving party, drawing all reasonable inferences in that party’s favor.” Barbour, 63 F.3d at 36.

### III. ARGUMENT

#### a. There Was No Notice of a Hazardous Condition With the Ambulance Cot

To sustain a claim of negligence against Sherborn, the plaintiff must show that: 1) Sherborn owed the plaintiffs a duty of reasonable care; 2) that Sherborn breached that duty; 3) that the breach actually and proximately caused incident; and 4) that the plaintiff suffered damages. Coughlin v. Titus & Bean Graphics, Inc., 54 Mass.App.Ct. 633, 638 (2002). Without evidence that Sherborn created the dangerous condition, knew of the dangerous condition or had reason to know of the dangerous condition, no duty of care attaches, and there can be no breach. Oliveri v. Massachusetts Bay Transportation Authority, 363 Mass. 165, 167, 292 N.E.2d 863, 864 (1973).<sup>1</sup>

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<sup>1</sup> See also, Goraj v. Nowak Funeral Home, slip op., 2006 WL 959473, at \*2 (Mass.App.Ct., Apr. 13, 2006)(copy of opinion enclosed as Exhibit 16)(overruling the denial of defendant Nowak’s motion for a directed verdict on the



In Oliveri, the court spelled out the rule well with regard to liability for hazardous conditions. The Oliveri court held that without evidence that: 1) the defendant caused the hazard; 2) the defendant actually knew the hazard was there; or 3) the hazard was there for so long that the defendant should have reasonably discovered it, there could be no liability. Id. at 167.

In the case at bar there is no genuine dispute that the cot failed to stand on its own – as it had done flawlessly for six years – due to a damaged part. A manufacturer-certified repair technician deposed by the plaintiff has testified that he replaced a damaged auxiliary lock lever on the cot after the incident, and that this faulty lever would explain why the cot did not perform as expected by the EMTs. The cot has performed flawlessly for almost four years since the lever was replaced. On the undisputed facts, it is clear that the bent auxiliary lock lever was the cause of the cot's failure. Indeed, the plaintiff admits that if the cot was not faulty, the accident would not have occurred. Ex. 1, pp. 95:12-96:2.

There is no evidence to suggest that the Town employees damaged the lever, and in fact, there is no evidence as to how the lever was damaged at all. Without evidence that the defendant *caused* the damage to the cot, the plaintiff must show that the defendant knew or should have known that the cot was defective and dangerous, and failed to warn of or remedy this hazard. Oliveri v. MBTA, 363 Mass. at 167.

The defendant Fire Chief and Deputy Chief Dowse have testified under oath that no one in his department had actual knowledge of the bent auxiliary lock lever until Deputy Chief Dowse inspected the cot the day after the incident. After extensive discovery, and depositions of all seven Town employees with first hand knowledge of the incident, absolutely no evidence to the contrary has been revealed. There simply is no evidence that the defendant had *actual prior*

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ground that there was no evidence of notice of a defect in a sloped access ramp).

*knowledge* of the damage to the cot.

Furthermore, there is no evidence that Sherborn had *reason to know* about the cot's damaged condition prior to the incident. The uncontroverted evidence not only fails to support that the defendant had good reason to know about the damage – it establishes that the defendant had absolutely no reason to know about the problem. The cot was used by the department without incident for almost six years as of the date of the incident. The cot was inspected thoroughly by the state six times from 1997 through 2002 (the 2003 inspection occurred after-the-fact, in April, 2003), and it passed with flying colors each time. The cot was inspected by the defendant employees regularly, including a documented inspection just four days before the incident. No problem was ever noted in the February 2, 2003 Ambulance Checklist or in dozens of prior checklists. **The Fire Chief personally used the cot the day prior to the incident, and it performed flawlessly.** The auxiliary lock lever was somehow bent in an area underneath the mattress and frame of the cot – **where it was not readily visible to an operator.** In the context of emergency medical services, it would be patently unreasonable to suggest that EMTs faced with an emergency alarm must test their equipment before departing the station. On this record there is simply no disputing that the EMTs simply had no reason to know that the cot was damaged, and had every reason to expect that it would perform as flawlessly as it had during hundreds of prior uses since 1997.

Without evidence of notice of the damaged condition of the cot, actual or constructive, the plaintiffs cannot reasonably be expected to meet their burden on this critical element. All counts arise from the same operative facts, and are based in negligence. Feltch v. General Rental Co., 383 Mass. 603, 607, 421 N.E.2d 67 (1981)(holding that while consortium claims enforce independent rights legal for legal damages, they rely upon the same operative facts as to

liability). As such, all claims fail as a matter of law for want of notice, and summary judgment is appropriate.

**b. The Consortium Plaintiffs Have Failed to Present Their Claims**

The Massachusetts Tort Claims Act is the exclusive remedy for a negligence claim against a municipality such as the defendant. MASS. GEN. LAWS ch. 258, § 2. The exclusivity provision of the MTCA provides that the MTCA is the exclusive remedy against a public employer for, “injury or loss of property ...caused by the negligent or wrongful act or omission of any public employee.... The remedies provided by this chapter shall be exclusive of any other civil action or proceeding by reason of the same subject matter....” *Id.* The EMTs are Town of Sherborn employees, clearly making the MTCA the plaintiffs’ sole remedy. *Ex. 2*, p. 6; *Ex. 3*, p. 7; MASS. GEN. LAWS ch. 258, § 2.

Pursuant to Section 4 of the MTCA, a civil action **shall not** be instituted against a public employer for negligence unless the claimant first presented her claim in writing to the municipality within two years after the cause of action arose. MASS. GEN. LAWS. ch. 258 § 4; *Krasnow v. Allen*, 29 Mass. App.Ct. 562, 566, 562 N.E.2d 1375 (1990). The presentment requirement is a condition precedent to filing suit under the MTCA. *Spring v. Geriatric Authority of Holyoke*, 394 Mass. 274, 283, 475 N.E.2d 727 (1985). All plaintiffs must make presentment “in strict compliance” with the statute. *Gilmore v. Commonwealth*, 417 Mass. 718, 721, 632 N.E.2d 838 (1994). The only presentment letter received by the defendant was a letter dated April 30, 2003 from an Attorney Scott Joseph, on behalf of plaintiff Joseph H. Koran. *Pls.’ Compl.* (letter annexed to Complaint as Exhibit A).

When outlining the requirement as to the content of a presentment letter under the MTCA, the Supreme Judicial Court has held that to reach the intended goals of presentment, the

presentment letter should be precise as to the legal basis of the claim, and must not be, “so obscure that educated public officials should find themselves baffled or misled with respect to [a plaintiff’s] assertion of a claim.” Gilmore v. Commonwealth, 417 Mass. 718, 723, 632 N.E.2d 838 (1994). Any theory of recovery which is pled in a complaint, but which was not previously articulated in a presentment letter, is subject to dismissal. See, Tambolleo v. Town of W. Boylston, 34 Mass. App. Ct. 526, 532-33, 613, N.E.2d 127 (1993), rev. den’d, 416 Mass. 1103, 618 N.E.2d 1364 (1993).

In the Commonwealth, loss of consortium is an independent tort, and not derivative of the underlying tort. Olsen v. Bell Telephone Laboratories, Inc., 388 Mass. 171, 176, 445 N.E.2d 609, 612 (1983). The consortium plaintiffs are therefore enforcing an independent right, and as such, all four were required to present their claims in writing to the defendant on or before February 6, 2005. MASS. GEN. LAWS ch. 258 § 4. As noted above, this was a condition precedent to their lawsuit, Spring v. Geriatric Authority of Holyoke, 394 Mass. 274, 283, 475 N.E.2d 727 (1985), and must be strictly complied with. Gilmore v. Commonwealth, 417 Mass. 718, 721, 632 N.E.2d 838 (1994).

When addressing presentment requirements in the context of consortium claims, a Massachusetts Appeals Court held that a mother’s general presentment of a lead paint poisoning claim as mother and next friend of her two small children was adequate presentment of her own claims for resultant negligent infliction of emotional distress and loss of consortium, despite her failure to articulate those legal theories. Martin v. Commonwealth, 53 Mass.App.Ct. 526, 760 N.E.2d 313 (2002). However, the wisdom and continued viability of Martin is brought into question by subsequent appellate level case law signaling a trend back towards strict compliance with the presentment requirement of the MTCA. Garcia v. Essex County Sheriff’s Dept., 65

Mass. App.Ct. 104, 109-10, 837 N.E.2d 284 (2005). The Garcia Court found Garcia's failure to articulate a specific legal theory in his presentment letter was fatal to his case. Id. at 110.

Martin is factually distinguishable from the undisputed facts in the case at bar in critical aspects. First, in Martin, the presentment letter started by noting that the attorney **represented the mother** for claims involving her childrens' ingestion of lead paint. Id. at 527. The mother was specifically identified as the client of the attorney authoring the letter, and it could therefore be said that the Commonwealth defendant received a presentment letter from the mother. In contrast, the predecessor attorney in the case at hand represented only Joseph H. Koran. Ex. A of Pl.'s Compl. The consortium plaintiffs were not identified as clients; indeed, they were not identified at all. Id. That means that in this case, the defendant has received nothing from the consortium plaintiffs or their representative along the lines of presentment. Having brought independently cognizable claims, their failure to comply with this condition precedent to bringing their claims is fatal to their claims against the Town.

Martin can also fairly be placed on the outer fringe of what is acceptable as to the content of a presentment letter. The Court referred to the presentment letter in Martin, in pertinent part, as not being a "model of particularity." Id. at 530. Holding that it nevertheless sufficed, the Court noted that presentment letter in Martin described the circumstances of the grave injuries to the mother's two small children in painstaking detail, outlining the costly and painful treatment that they had undergone, and detailing how, notwithstanding the treatment, the lead paint poisoning had nevertheless significantly retarded their vocational, social, educational and intellectual development. Id. The letter lacked only the specific legal theories relative to direct claims from the mother. Id. at 530. The factual detail supplied led the Martin Court to conclude that it would "require no leap of faith" that the mother would be distressed under the grave



circumstances, and would have her own claims to assert against the Commonwealth.

In contrast, the consortium plaintiffs in the case at bar were not even identified, beyond a casual and generic reference to a “wife” and “two children” in a paragraph detailing how the plaintiff Joseph Koran’s purported back injury has impacted his own personal life. *Id.* Indeed, Erik Koran was not even conceived when the presentment letter was written, having been born 18 months later. There was no mention of loss of affections, relations or emotional support. The letter was delivered by a representative of Joseph H. Koran, for Joseph H. Koran and written from the perspective of how the alleged injury affected the life of one Joseph H. Koran. It may or may not be that for the purpose of the MTCA a mother’s distress and loss of affection can fairly be presumed from the poisoning and resultant permanent mental disability of her children. *Martin*, 53 Mass.App.Ct. at 530. But to hold that an educated public official reading Joseph H. Koran’s presentment letter would be cognizant of consortium claims by unidentified plaintiffs would take the reasoning of *Martin* too far, and would in effect excuse all consortium plaintiffs from the presentment requirement of the MTCA.

In summary, the defendant received no presentment letter from any of the consortium plaintiffs, and Joseph H. Koran’s presentment letter is insufficient to present their claims on the undisputed facts of this case and as a matter of law. As such, summary judgment must be granted in favor of the defendant as to the consortium claims.

**c. Plaintiff Erik Koran Has No Cognizable Claim Because He Was Not Yet Conceived**

Massachusetts law limits loss of parental consortium claims to those children who were conceived at the time of the parent’s injury. *Lareau v. Page*, 39 F.3d 384, 390 (1st Cir., 1994)(citing *Angelini v. OMD, Corp.*, 410 Mass 653, 575 N.E.2d 41, 43 (1991)). According to consortium plaintiff Erik Koran’s interrogatory replies, he was born on October 20, 2004. *Pl.’s*

Interrogs., #1. This was more than 20 and one half months, or 613 days, after the incident of February 6, 2003. Common sense dictates that there is no physical possibility that Erik was even conceived as of the date of the incident.<sup>2</sup> Therefore, Erik has no cognizable claim under Massachusetts law.

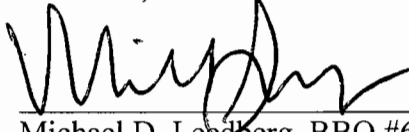
#### IV. CONCLUSION

On this record there is no genuine dispute of material facts, and the defendant is entitled to judgment as to: 1) all counts, because on the undisputed facts the defendant had no notice of the damaged cot; 2) the consortium counts (Counts Four, Eight, Nine & Ten) because the consortium plaintiffs failed to present their claims in writing as required by law; and 3) Erik Koran's consortium count (Count Ten) because he was not yet conceived at the time of the underlying incident of February 6, 2003. Therefore, the defendant is entitled to judgment as a matter of law.

The defendant,

TOWN OF SHERBORN,  
By its attorneys,

**PIERCE, DAVIS & PERRITANO, LLP**



Michael D. Leedberg, BBO #660832  
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Dated December 19, 2006

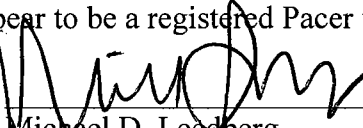
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<sup>2</sup> The expected human gestation period is 280 days, with a normal range of 259 days (37 weeks) to 287 (41 weeks). *Taber's Cyclopedic Medical Dictionary*, p. 868 (F.A. Davis, 19<sup>th</sup> Ed.) (copy enclosed as Exhibit 17). To the extent that it may be deemed or raised as an issue, the defendant asks that the court take judicial notice of the common knowledge that there is no physical possibility that Erik was conceived 613 days (Feb. 6, 2003 – Oct. 20, 2004 (2004 was a leap year)) before his birth.



**CERTIFICATE OF SERVICE**

I hereby certify that a true and accurate copy of the above document was served upon the co-defendant Weaver's counsel of record on December 19, 2006 at his address of record via regular mail. Weaver's counsel does not appear to be a registered Pacer user.

  
\_\_\_\_\_  
Michael D. Leeborg

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 1**  
**Plaintiff's Deposition**



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<p style="text-align: center;">UNITED STATES DISTRICT COURT FOR THE DISTRICT OF MASSACHUSETTS</p> <p>-----</p> <table border="0"> <tr><td>JOSEPH H. KORAN, AND</td><td>*</td></tr> <tr><td>KIMBERLY KORAN, IND. AND</td><td>*</td></tr> <tr><td>ON BEHALF OF ANA KORAN,</td><td>*</td></tr> <tr><td>JOSEPH KORAN, JR., AND</td><td>*</td></tr> <tr><td>ERIC KORAN, MINORS</td><td>*</td></tr> <tr><td>Plaintiffs</td><td>* CA No. 05-11454 RGS</td></tr> <tr><td>vs.</td><td>*</td></tr> <tr><td>ELIZABETH WEAVER, AND</td><td>*</td></tr> <tr><td>TOWN OF SHERBORN</td><td>*</td></tr> <tr><td>Defendants</td><td>*</td></tr> </table> <p>-----</p> <p style="text-align: center;">DEPOSITION OF: JOSEPH H. KORAN</p> <p style="text-align: center;">BLACK CETKOVIC &amp; WHITESTONE</p> <p style="text-align: center;">200 Berkeley Street</p> <p style="text-align: center;">Boston, MA 02116</p> <p style="text-align: center;">July 21, 2006</p> <p style="text-align: center;">Commenced at 10:49 a.m.</p> <p style="text-align: center;">LESLIE A. D'EMILIA</p>	JOSEPH H. KORAN, AND	*	KIMBERLY KORAN, IND. AND	*	ON BEHALF OF ANA KORAN,	*	JOSEPH KORAN, JR., AND	*	ERIC KORAN, MINORS	*	Plaintiffs	* CA No. 05-11454 RGS	vs.	*	ELIZABETH WEAVER, AND	*	TOWN OF SHERBORN	*	Defendants	*	<p style="text-align: center;">INDEX</p> <p>1 Witness Direct Cross Redirect Recross</p> <p>2 JOSEPH H. KORAN</p> <p>3</p> <p>4 By Mr. Cetkovic 5</p> <p>4 By Mr. Durso</p> <p>By Mr. Leedberg 36</p> <p>5 EXHIBITS</p> <table border="0"> <tr><th>Number</th><th>Page</th></tr> <tr><td>1</td><td>MetroWest Medical Records 48</td></tr> <tr><td>2</td><td>Sherborn &amp; Rescue Records 56</td></tr> <tr><td>3</td><td>Sherborn Fire Dept. Records 57</td></tr> <tr><td>4</td><td>Answers to Interrogatories 88</td></tr> <tr><td>5</td><td>Report 2-10-03 95</td></tr> <tr><td>6</td><td>Medical records 104</td></tr> </table> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	Number	Page	1	MetroWest Medical Records 48	2	Sherborn & Rescue Records 56	3	Sherborn Fire Dept. Records 57	4	Answers to Interrogatories 88	5	Report 2-10-03 95	6	Medical records 104
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<p>1 APPEARANCES:</p> <p>2 Representing the Plaintiff, Joseph H. Koran:</p> <p>3 LAW OFFICE OF CARMEN L. DURSO</p> <p>4 Suite 1425</p> <p>175 Federal Street</p> <p>5 Boston, MA 02110-2241</p> <p>(617) 728-9123</p> <p>6 dursolaw@tiac.net</p> <p>7 Representing the Defendant, Elizabeth Weaver:</p> <p>8 BLACK CETKOVIC &amp; WHITESTONE</p> <p>200 Berkeley Street</p> <p>9 Boston, MA 02116</p> <p>10 BY: DRAGAN CETKOVIC, ESQ.</p> <p>(617) 236-1900</p> <p>11</p> <p>12 Representing the Defendant, Town of Sherborn:</p> <p>13 PIERCE, DAVIS &amp; PERRITANO, LLP</p> <p>14 Ten Winthrop Square</p> <p>15 Boston, MA 02110-1257</p> <p>16 BY: MICHAEL D. LEEDBERG, ESQ.</p> <p>17 (617) 350-0950 EXT. 105</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p>1 MR. CETKOVIC: Can we agree to the</p> <p>2 stipulations that all objections and motions to</p> <p>3 strike are reserved until the time of trial or</p> <p>4 motion for summary judgment, whichever comes first?</p> <p>5 MR. DURSO: Sure.</p> <p>6 MR. CETKOVIC: And how about signing the</p> <p>7 transcript?</p> <p>8 MR. DURSO: Waive the notary, 30 days.</p> <p>9 MR. CETKOVIC: Any other preliminary</p> <p>10 matters?</p> <p>11 MR. DURSO: No.</p> <p>12 STIPULATION</p> <p>13 It is hereby stipulated and agreed by and</p> <p>14 between counsel for the respective parties that the</p> <p>15 sealing and filing of the deposition in court are</p> <p>16 waived; that the witness shall read and sign the</p> <p>17 deposition transcript under the pains and penalties</p> <p>18 of perjury, within thirty days of receipt thereof.</p> <p>19 It is further stipulated that all objections,</p> <p>20 except as to the form of the question, and all</p> <p>21 motions to strike are reserved until the time of</p> <p>22 trial.</p> <p>23 JOSEPH H. KORAN,</p> <p>24 having been satisfactorily identified by the</p>																																		

2 (Pages 5 to 8)

<p style="text-align: right;">Page 5</p> <p>1 production of his driver's license and duly sworn by</p> <p>2 the Notary Public, testified under oath as follows:</p> <p>3 DIRECT EXAMINATION</p> <p>4 BY MR. CETKOVIC:</p> <p>5 Q. Sir, could you state your full name, please?</p> <p>6 A. Joseph Henry Koran.</p> <p>7 Q. Mr. Koran, my name is Dragan Cetkovic, and I</p> <p>8 represent Elizabeth Weaver in this personal injury</p> <p>9 lawsuit that you brought. I'm going to ask you a</p> <p>10 series of questions today. This is a deposition</p> <p>11 proceeding. Let me ask you first, have you ever</p> <p>12 been through a deposition before this one?</p> <p>13 A. No.</p> <p>14 Q. Just a couple of ground rules. Let me finish my</p> <p>15 question before you start answering. Okay?</p> <p>16 A. Okay.</p> <p>17 Q. You have to give verbal answers so the stenographer</p> <p>18 can take it down. In other words, "uh-uh" or</p> <p>19 "uh-huh," you never know how that's going to come</p> <p>20 out in the transcript. Do you understand that?</p> <p>21 A. I do.</p> <p>22 Q. If you at any time need a break or want to talk to</p> <p>23 your attorney, just let us know. All right?</p> <p>24 A. Okay.</p>	<p style="text-align: right;">Page 7</p> <p>1 A. Sodexho.</p> <p>2 Q. How's that spelled?</p> <p>3 A. S-o-d-e-x-h-o.</p> <p>4 Q. And how long have you been with Sodexho?</p> <p>5 A. Three weeks.</p> <p>6 Q. What is your salary?</p> <p>7 A. Current salary is \$85,000 a year.</p> <p>8 Q. Do you have a bonus or profit sharing?</p> <p>9 A. Yes.</p> <p>10 Q. What is that?</p> <p>11 A. Bonus is up to 20 percent of my salary.</p> <p>12 Q. So you've been in this job just for three weeks;</p> <p>13 correct?</p> <p>14 A. Correct.</p> <p>15 Q. What did you do before?</p> <p>16 A. Worked for US Foodservice as a category manager of</p> <p>17 seafood.</p> <p>18 Q. And they're similar duties?</p> <p>19 A. Yes.</p> <p>20 Q. Currently where's your office located physically?</p> <p>21 A. Gaithersburg, Maryland.</p> <p>22 Q. Gay?</p> <p>23 A. G-a-i-t-h-e-r-s-b-u-r-g.</p> <p>24 Q. And as a manager what are your duties?</p>
<p style="text-align: right;">Page 6</p> <p>1 Q. What is your current residential address?</p> <p>2 A. 6101 Twain Drive, Newmarket, Maryland 21774.</p> <p>3 Q. And how long have you been living at this address?</p> <p>4 A. October 31, 2005 I moved in.</p> <p>5 Q. Is it a house?</p> <p>6 A. Yes.</p> <p>7 Q. Do you own it?</p> <p>8 A. Yes.</p> <p>9 Q. What is your Social Security number?</p> <p>10 A. 275-44-9317.</p> <p>11 Q. Are you married?</p> <p>12 A. Yes.</p> <p>13 Q. Your spouse's name?</p> <p>14 A. Kimberly Ann Koran.</p> <p>15 Q. Do you have kids?</p> <p>16 A. Yes.</p> <p>17 Q. How many?</p> <p>18 A. Three.</p> <p>19 Q. Do you currently work?</p> <p>20 A. Yes.</p> <p>21 Q. What do you do?</p> <p>22 A. I'm a senior manager of supplies, seafood and</p> <p>23 poultry, for a management company.</p> <p>24 Q. What's the name of the management company?</p>	<p style="text-align: right;">Page 8</p> <p>1 A. Negotiate purchasing contracts.</p> <p>2 Q. Does that involve lots of travelling?</p> <p>3 A. Can you define lots?</p> <p>4 Q. What is currently the percentage of your time spent</p> <p>5 in travel?</p> <p>6 A. 20 percent.</p> <p>7 Q. Tell me a little bit about your educational</p> <p>8 background?</p> <p>9 A. I graduated from high school in 1980. Attended--</p> <p>10 Q. Which one?</p> <p>11 A. --North High in East Lake, Ohio. I went to</p> <p>12 Defiance College for two years in Defiance, Ohio.</p> <p>13 Q. Did you get a degree?</p> <p>14 A. No. Went to University of Akron for two years in</p> <p>15 Akron, Ohio. Did not complete my degree.</p> <p>16 Q. Did not?</p> <p>17 A. No. I'm currently enrolled at the</p> <p>18 University of Phoenix on-line.</p> <p>19 Q. For what degree?</p> <p>20 A. Business management.</p> <p>21 Q. For bachelor's degree?</p> <p>22 A. Yes.</p> <p>23 Q. When do you expect to complete that?</p> <p>24 A. 2007.</p>

<p style="text-align: right;">Page 9</p> <p>1 Q. Your date of birth and place?</p> <p>2 A. November 25, 1961, Painesville, Ohio.</p> <p>3 Q. In 2003 were you employed?</p> <p>4 A. Yes.</p> <p>5 Q. Who did you work for?</p> <p>6 A. Schwan's Food Service.</p> <p>7 Q. And where are they out of?</p> <p>8 A. Marshall, Minnesota.</p> <p>9 Q. Where was your office?</p> <p>10 A. Cicero, New York.</p> <p>11 Q. What's there? Is it an office building, or do you</p> <p>12 work out of your house?</p> <p>13 A. In New York?</p> <p>14 Q. Yes.</p> <p>15 A. I worked out of my house.</p> <p>16 Q. What was your position?</p> <p>17 A. Zone manager.</p> <p>18 Q. And what was your zone?</p> <p>19 A. The northeast United States.</p> <p>20 Q. And what were your duties?</p> <p>21 A. Managed a team of regional managers. I had five</p> <p>22 regional managers and managed the P &amp; L for the</p> <p>23 entire zone for foodservice sales.</p> <p>24 Q. What's P &amp; L?</p>	<p style="text-align: right;">Page 11</p> <p>1 Q. Salary was the same?</p> <p>2 A. Salary was at 92,000 in 2002. I received an</p> <p>3 increase in 2003.</p> <p>4 Q. Did you have any other compensation from your</p> <p>5 company other than salary and bonus?</p> <p>6 A. I had a company vehicle. I don't know if that was</p> <p>7 considered compensation.</p> <p>8 Q. Anything else? Any other perks?</p> <p>9 A. I guess I would ask to define what perks are.</p> <p>10 Q. Benefits?</p> <p>11 A. Well, there was a percentage of health benefits that</p> <p>12 were paid if that's what you're asking.</p> <p>13 Q. Health. Did you at that time in 2003 have any other</p> <p>14 source of income?</p> <p>15 A. No.</p> <p>16 Q. On February 6, 2003 you were on business in</p> <p>17 Massachusetts; am I correct?</p> <p>18 A. Correct.</p> <p>19 Q. What was your mission? What was your business</p> <p>20 purpose?</p> <p>21 A. I had a meeting with a broker and my regional</p> <p>22 managers.</p> <p>23 Q. Where was the meeting scheduled?</p> <p>24 A. At the Sherborn Inn.</p>
<p style="text-align: right;">Page 10</p> <p>1 A. Profit and loss statement.</p> <p>2 Q. So you were more in the managerial position rather</p> <p>3 than, you know, actually selling or purchasing or</p> <p>4 whatever? Am I correct?</p> <p>5 A. I was in a management position, yes.</p> <p>6 Q. And what was the percentage of your travel outside</p> <p>7 of your office at that time?</p> <p>8 A. 80 percent.</p> <p>9 Q. And what would you do on these business trips?</p> <p>10 A. Met with--worked with my regional managers. Met</p> <p>11 with clients, brokers.</p> <p>12 Q. Were you purchasing food for Schwan's, or you were</p> <p>13 selling their food?</p> <p>14 A. Selling products we manufactured.</p> <p>15 Q. And what were the products?</p> <p>16 A. Three categories, pizza, Asian, southwestern.</p> <p>17 Q. Frozen food?</p> <p>18 A. Yes.</p> <p>19 Q. How much were you making at that time in 2003?</p> <p>20 A. 95,000.</p> <p>21 Q. Any bonuses?</p> <p>22 A. Yes, up to 25 percent of my salary.</p> <p>23 Q. Do you recall what was your bonus in 2002?</p> <p>24 A. I do not recall what my bonus was.</p>	<p style="text-align: right;">Page 12</p> <p>1 Q. Where?</p> <p>2 A. In Sherborn, Massachusetts.</p> <p>3 Q. Had you been there before, before this trip?</p> <p>4 A. No.</p> <p>5 Q. You lived at that time in Cicero, New York?</p> <p>6 A. Correct.</p> <p>7 Q. Did you travel that day, February 6th?</p> <p>8 A. Yes.</p> <p>9 Q. How did you travel from New York to Massachusetts?</p> <p>10 A. I drove a rented vehicle.</p> <p>11 Q. What was the vehicle?</p> <p>12 A. A Ford Expedition.</p> <p>13 Q. Is that the biggest SUV in the Ford's line-up?</p> <p>14 A. I'm not familiar with their specifications, so I</p> <p>15 can't answer that.</p> <p>16 Q. Have you driven an Expedition before this day?</p> <p>17 A. Yes.</p> <p>18 Q. You said you had an employee's vehicle also?</p> <p>19 A. Yes.</p> <p>20 Q. Was there any reason why you didn't take the</p> <p>21 employee's vehicle?</p> <p>22 A. Yes, there is. I had a number of things that were</p> <p>23 shipped to me from our corporate office that I</p> <p>24 needed to take to the regional managers that I had</p>



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<p>1 there, that I could not carry in that vehicle.</p> <p>2 Q. Did you have a valid driver's license at that time?</p> <p>3 A. Yes.</p> <p>4 Q. Issued by which state?</p> <p>5 A. New York.</p> <p>6 Q. Has your driver's license ever been revoked or</p> <p>7 suspended?</p> <p>8 A. No.</p> <p>9 Q. Never in your life?</p> <p>10 A. I don't recall. I may--not that I remember, not</p> <p>11 that I remember.</p> <p>12 Q. Have you at any time in your life maintained a</p> <p>13 residence in Massachusetts?</p> <p>14 A. No.</p> <p>15 Q. What time did you start your trip on</p> <p>16 February 6, 2003?</p> <p>17 A. Probably about 10:00 in the morning.</p> <p>18 Q. And what's the approximate time you arrived in</p> <p>19 Sherborn?</p> <p>20 A. I was arriving in Sherborn at the time of the</p> <p>21 incident. Around 6:00, 6:30, in that range.</p> <p>22 Q. When was your meeting?</p> <p>23 A. Where was my meeting?</p> <p>24 Q. I'm sorry, when? When was your meeting scheduled</p>	<p>1 Q. Were you talking on the cell phone at that time as</p> <p>2 you were backing up?</p> <p>3 A. No.</p> <p>4 Q. So correct me if I'm wrong, you looked, but you</p> <p>5 didn't see anyone behind you; is that correct?</p> <p>6 A. Correct.</p> <p>7 Q. You bumped into something; correct?</p> <p>8 A. Correct.</p> <p>9 Q. How did you learn that the other--that object in</p> <p>10 which you bumped was the motor vehicle?</p> <p>11 A. I got out of my vehicle to look behind me.</p> <p>12 Q. Okay. And what did you see?</p> <p>13 A. I saw that there was a car there.</p> <p>14 Q. Can you describe that car?</p> <p>15 A. It was a small vehicle. It was a Honda Civic.</p> <p>16 Q. What did you do next?</p> <p>17 A. I approached the door to see if the person behind me</p> <p>18 was all right.</p> <p>19 Q. And why did you do that?</p> <p>20 A. Because I bumped the vehicle. I just wanted to be</p> <p>21 sure that I didn't, you know, bump into it too hard</p> <p>22 or anything. It didn't seem like it, but you never</p> <p>23 know.</p> <p>24 Q. So what was the first thing you did as you were</p>
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<p>1 for?</p> <p>2 A. The meeting was scheduled for 6:30.</p> <p>3 Q. Were you late for your meeting?</p> <p>4 A. I was running behind.</p> <p>5 Q. You had an incident that day when your vehicle hit</p> <p>6 another vehicle; is that correct?</p> <p>7 A. Yes.</p> <p>8 Q. Could you describe how that happened?</p> <p>9 A. I pulled into the Sherborn Inn, into the area, and</p> <p>10 as I pulled up I noticed a sign that stated one-way,</p> <p>11 and I was going the wrong way in the one-way. So I</p> <p>12 had come to a stop. I looked in both side mirrors,</p> <p>13 in which one side I could see a snow bank. The</p> <p>14 other side I could see a clear parking lot. I</p> <p>15 looked in the mirror out to look behind me. I saw</p> <p>16 nothing behind me. I turned around and looked and</p> <p>17 began to back up and bumped into a vehicle behind</p> <p>18 me.</p> <p>19 Q. What distance did you back up before you hit the</p> <p>20 other vehicle?</p> <p>21 A. Between three and five feet maximum.</p> <p>22 Q. Have you heard beeping of the horn as you were</p> <p>23 backing up?</p> <p>24 A. No.</p>	<p>1 approaching the other vehicle?</p> <p>2 A. Well, I started walking towards the vehicle, and the</p> <p>3 person in the other vehicle got out of their</p> <p>4 vehicle.</p> <p>5 Q. Can you describe that person?</p> <p>6 A. It was an older woman, and you know, dressed--I</p> <p>7 don't know. Her attire was very LL Bean like I</p> <p>8 guess you would say.</p> <p>9 Q. How tall was she?</p> <p>10 A. I would say approximately five, two, five, three.</p> <p>11 Q. And you said elderly lady; is that right?</p> <p>12 A. Yes.</p> <p>13 Q. Were you able to estimate her age at that time?</p> <p>14 A. My guess was probably late 60s, early 70s.</p> <p>15 Q. Did you say anything to her?</p> <p>16 A. The first thing I said was, "Geez, I'm sorry, I</p> <p>17 didn't even know you were there."</p> <p>18 Q. Did she respond to that?</p> <p>19 A. She did.</p> <p>20 Q. What did she say?</p> <p>21 A. She was--she started to yell at me in a very</p> <p>22 aggressive manner, which took me by surprise.</p> <p>23 Q. Do you remember any specific words that she said to</p> <p>24 you?</p>



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<p>1 A. All I remember is she was very angry and was  2 yelling, and I was just shocked because she was  3 using some expletives that were—I would not find  4 characteristic of a 70-something year old or an  5 elderly woman to use.  6 Q. Could you tell us what words that she used?  7 A. She called me an asshole. She said, "Are you  8 stupid?" And she was went on—it was just the  9 aggressive nature of her yelling. It just did not  10 seem characteristic of a woman. My mother is close  11 to the same age.  12 Q. How tall you are?  13 A. Six foot.  14 Q. And were you afraid for your safety at that time?  15 A. No.  16 Q. You were not scared of this older lady; correct?  17 A. I was shocked. I was not scared.  18 Q. Shocked meaning in a sense of surprise?  19 A. Yes.  20 Q. So what happened next? Did you—what did you do  21 next?  22 A. I said—you know, I apologized again. I said,  23 "Thank goodness nobody got hurt. Let's exchange  24 information." To which I went and got the</p>	<p>1 started to step away because the two cars were close  2 together to give her clearance, and as I was backing  3 away, she took off and drove over my foot.  4 Q. Which one?  5 A. My left foot.  6 Q. What would you estimate this exchange, this—what  7 was the time frame from the moment you got out of  8 your car until she drove off?  9 A. Probably less than two minutes.  10 Q. Have you used any profane language towards her?  11 A. I was sarcastic, but I would say profane language  12 was probably after she ran over my foot I did swear.  13 Q. How were you sarcastic? Can you be a little more  14 specific, what exactly you said that was sarcastic?  15 A. I said, "Do you think that I drove here from  16 New York just to back into your vehicle," and she  17 said, "Yes," and I said, "You've got to be kidding  18 me." It was as if—I was just shocked at the fact  19 that she just was very aggressive in thinking that  20 this was intentional in some way when it was clearly  21 just an accident, a simple mistake that was easily  22 corrected.  23 Q. The accident then was your fault; is that correct?  24 A. Yes.</p>
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<p>1 appropriate insurance information out of my daytimer  2 in the car. She was gathering her information. We  3 exchanged information. Went back to our cars to  4 write down each other's information.  5 Q. Did she get out of the car? I think you testified  6 that she got out of the car and starting yelling at  7 you; is that correct?  8 A. Yes.  9 Q. So she gave you her paperwork. You gave her your  10 paperwork. What happened after that?  11 A. I recorded all the information about her. I don't  12 know what she did with my information, but I  13 recorded the information about her, and then I went  14 to return it to her vehicle while she was sitting in  15 her vehicle.  16 Q. Did you say anything to her at that time?  17 A. Yes, I said, "I'm sorry, I made a mistake."  18 Q. And what did she say, if anything?  19 A. She said, you know—I said, "I'm sorry, I made a  20 mistake. Haven't you ever made a mistake?" And she  21 said no. And I said, "You're telling me you never  22 made a mistake in your life," and she said, "No,"  23 and I just said, "Wow, that's amazing," and at that  24 point she threw her car in reverse, backed up. I</p>	<p>1 Q. Did you at any time during this exchange of words  2 make any aggressive movements towards this lady?  3 A. No.  4 Q. And the exact location of this incident was in the  5 parking lot of the Sherborn Inn?  6 A. It was not in the parking lot. It was in the  7 driveway area that was leading to the parking lot  8 and near where the entrance circle was, the drop off  9 area was near that.  10 Q. So off the main street, but not in a parking lot?  11 A. Correct.  12 Q. And do you know what the street name is, the main  13 street there?  14 A. It's almost like an alley. It's Powder House or  15 Powder Home or something like that. I don't  16 remember the name of it. Something along that line.  17 Q. What happened to you when she ran over your left  18 foot?  19 A. Well, it knocked me to the ground.  20 Q. How did you fall to the ground?  21 A. I tried to—I was trying to back away, and it ran  22 over my foot, and I fell trying to move with—you  23 know, as the vehicle was rolling, I just rolled to  24 my left side and fell. It wasn't a fast fall</p>

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<p>1 because I was trying to brace myself from pulling my 2 leg out from underneath the vehicle, and you know, 3 as she was driving off. 4 Q. You said you braced yourself. So you landed on your 5 hands? 6 A. I landed on one hand and to the side. 7 Q. Did any part of your back or your shoulders come in 8 contact with the surface? 9 A. I believe my--I sat down on my left side on the 10 ground, but I caught myself with my left hand. 11 Q. What did you do next? 12 A. I had yelled, "Hey." I said, "What the hell are you 13 doing," and then she just kept driving. 14 Q. What did you do next? 15 A. I called 911. 16 Q. And who arrived? 17 A. Two police officers and an ambulance. 18 Q. What did you tell police officers? 19 A. I told the police officers that I had had a minor 20 traffic incident with a woman, and after exchanging 21 information she drove off aggressively and drove 22 over my foot. They asked if I could describe her, 23 and I gave them the information about her. 24 Q. What kind of footwear did you have on that day?</p>	<p>1 Q. Let's first focus on the foot. Have you received 2 any treatment to your foot, specifically for your 3 foot, medical treatment? 4 A. Other than diagnosis? 5 Q. Tell me everything. 6 A. Yes, medical treatment. Yes, I have. 7 Q. Where was it? 8 A. I had x-rays-- 9 Q. Okay. What-- 10 A. --at the Natick Hospital. Physical exam at the 11 Natick Hospital. Physical exam by my primary care 12 physician when I got back to New York, and physical 13 exam by an orthopedic specialist that I was referred 14 to by my primary care. 15 Q. Okay. Let's start first with the x-rays. Did 16 anyone tell you what the x-rays have shown? 17 A. The attending physician at the ER said--yes, they 18 did give me the results of the x-rays. 19 Q. What did they tell you? 20 A. That it was not broken, no fractures. 21 Q. No fractures. Any injuries that they could see 22 there? 23 A. They said it was soft tissue damage. 24 Q. And the same doctor who read the x-rays looked also</p>
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<p>1 A. I had a pair of loafers, tassel loafers. 2 Q. Did you look at your foot right after the accident? 3 A. Did I look-- 4 Q. Yes. 5 A. I looked down at my foot, yes. 6 Q. Did you take off your shoe and stop to see-- 7 A. No, no. 8 Q. Did you feel anything? 9 A. I felt pain, and I felt a shooting pain through my 10 foot. 11 Q. And did you tell police officers about pain in your 12 foot? 13 A. Yes. 14 Q. What treatment, medical treatment, did you receive 15 for your foot? 16 A. Physical therapy. 17 Q. For your foot? 18 A. Uh-huh. 19 Q. How long was the physical therapy? 20 A. It was in conjunction with physical therapy for 21 another injury related to the accident. So it was 22 about three months. 23 Q. Is this--this PT was for your back and foot? 24 A. Yes.</p>	<p>1 into your foot; correct? 2 A. Yes. 3 Q. Examined? Do you remember the name of the doctor? 4 A. No. 5 Q. Did they prescribe any treatment for your foot at 6 that time? 7 A. They told me to follow-up with my physician at home. 8 Q. Was your leg swollen, foot swollen? 9 A. Yes. 10 Q. Did they put ice or anything on it? 11 A. There was ice in the ambulance, and then they put it 12 into a boot. 13 Q. What kind of boot? 14 A. One of the hard sole, and then it wraps around, and 15 you lace it up style orthopedic boot. 16 Q. And were you able to drive from Massachusetts to 17 New York? Were you able to drive back? 18 A. Yes. 19 Q. After the conclusion of your business trip? 20 A. Yes. 21 Q. Were you wearing the boot as you were driving? 22 A. Yes. 23 Q. How long you wore the boot? 24 A. I wore the boot for about four or five days.</p>

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<p>1 Q. Do you currently have any special orthopedic shoe</p> <p>2 for your left foot or anything like that?</p> <p>3 A. No.</p> <p>4 Q. Let's go back. You went back then to your primary</p> <p>5 doctor in New York?</p> <p>6 A. Yes.</p> <p>7 Q. When did you see him or her?</p> <p>8 A. The Monday that I returned. I returned on Sunday</p> <p>9 afternoon. I saw the doctor on Monday morning.</p> <p>10 Q. What was the reason you went to your primary doctor?</p> <p>11 A. My foot and my back were both injured.</p> <p>12 Q. Who was your primary doctor at that time?</p> <p>13 A. Dr. Diaz, D-i-a-z.</p> <p>14 Q. Is this the doctor that nobody can find his records?</p> <p>15 A. His practice was dissolved. So I believe his</p> <p>16 records were--are--they're having difficulty</p> <p>17 locating them.</p> <p>18 Q. Why was his practice dissolved?</p> <p>19 A. He and his partner, from what I understand, did not</p> <p>20 get along.</p> <p>21 Q. Is he still a practicing physician in the</p> <p>22 State of New York?</p> <p>23 A. He is an attending physician at hospitals.</p> <p>24 Q. Do you know where is he now?</p>	<p>1 is that right?</p> <p>2 A. Yes.</p> <p>3 Q. And foot?</p> <p>4 A. Yes.</p> <p>5 Q. In every session both back and foot?</p> <p>6 A. Yes.</p> <p>7 Q. Was your foot still swollen at that time?</p> <p>8 A. Not as swollen, no.</p> <p>9 Q. Why is it you needed physical therapy on your foot?</p> <p>10 A. I was having pain in the foot and having cramping</p> <p>11 spasms in the foot.</p> <p>12 Q. So after this physical therapy, that lasted, you</p> <p>13 said, three months?</p> <p>14 A. Yes.</p> <p>15 Q. You saw Dr. Wulff?</p> <p>16 A. While I was attending physical therapy I saw</p> <p>17 Dr. Wulff.</p> <p>18 Q. Did he examine your foot?</p> <p>19 A. Yes.</p> <p>20 Q. What did he say?</p> <p>21 A. He said that his opinion was that it was soft tissue</p> <p>22 damage or nerve damage, and there's really nothing</p> <p>23 that can be done. I should just live with it.</p> <p>24 Q. After you heard that, did you seek any other</p>
Page 26	Page 28
<p>1 A. I know he's in the hospital system in New York, the</p> <p>2 University's Hospital, I believe, in Syracuse, I</p> <p>3 believe.</p> <p>4 Q. Did you he examine your foot?</p> <p>5 A. Yes.</p> <p>6 Q. And what did he tell you?</p> <p>7 A. He said that if the x-rays did not show any</p> <p>8 fractures, then it was soft tissue, and I should</p> <p>9 just keep it elevated when I can and let it run its</p> <p>10 course and see how it works, and if it continues to</p> <p>11 bother, you know, go to physical therapy.</p> <p>12 Q. What was the next medical provider that you saw for</p> <p>13 your foot?</p> <p>14 A. The orthopedic doctor, Dr. Warren Wulff.</p> <p>15 Q. And when was that?</p> <p>16 A. That was about--I believe it was a couple months</p> <p>17 later after going to physical therapy.</p> <p>18 Q. So you went to physical therapy before you saw</p> <p>19 Dr. Wulff?</p> <p>20 A. Yes.</p> <p>21 Q. And this physical therapy, who prescribed the</p> <p>22 physical therapy?</p> <p>23 A. Dr. Diaz.</p> <p>24 Q. And this physical therapy, they treated your back;</p>	<p>1 treatment for your foot?</p> <p>2 A. At that point there was nothing else. You know,</p> <p>3 from two different--a physical therapist and a</p> <p>4 doctor, no, I didn't seek anything further.</p> <p>5 Q. Does your foot bother you?</p> <p>6 A. Yes.</p> <p>7 Q. Do you walk with a limp?</p> <p>8 A. At times.</p> <p>9 Q. Do you use a cane?</p> <p>10 A. No.</p> <p>11 Q. And you don't use any orthopedic devices; correct?</p> <p>12 A. No.</p> <p>13 Q. Where in your foot is the pain?</p> <p>14 A. The ball of my foot.</p> <p>15 Q. How active were you before this accident in terms of</p> <p>16 sports or any type of physical activities?</p> <p>17 A. I had--I was a member at a gym, which I had gym</p> <p>18 memberships prior to, and I had just joined a new</p> <p>19 gym a month prior to the accident. I had a</p> <p>20 little--I had two children at the time and was</p> <p>21 extremely busy with them. They were both very</p> <p>22 young. My daughter was only two. My son was less</p> <p>23 than a year. So I was very busy and very physically</p> <p>24 active with them.</p>



8 (Pages 29 to 32)

<p style="text-align: right;">Page 29</p> <p>1 Q. Did the foot injury prevent you from doing anything</p> <p>2 you did before the incident?</p> <p>3 A. Going on walks and such, yes.</p> <p>4 Q. Going on walks. Anything else?</p> <p>5 A. I don't recall at this point, but I'm sure there</p> <p>6 were other things.</p> <p>7 Q. When you returned to New York on Sunday, and you</p> <p>8 went to see the doctor on Monday, when did you go</p> <p>9 back to work?</p> <p>10 A. I did not go back to work until--well, I was on a</p> <p>11 conference call Monday, but I was doing that from my</p> <p>12 house and went physically back to work to meetings</p> <p>13 the following week.</p> <p>14 Q. And then that's in February of 2003. You lost your</p> <p>15 job sometime in April of that year?</p> <p>16 A. Yes.</p> <p>17 Q. Why did you lose your job?</p> <p>18 A. I don't know.</p> <p>19 Q. Were you given a reason?</p> <p>20 A. Yes.</p> <p>21 Q. What was that?</p> <p>22 A. The reason I was given was a misuse of a company</p> <p>23 credit card.</p> <p>24 Q. And at that time how long you been with this</p>	<p style="text-align: right;">Page 31</p> <p>1 thereafter?</p> <p>2 A. Shortly thereafter what?</p> <p>3 Q. Shortly after you reported your injury?</p> <p>4 A. My--I worked the day after my injury because I had a</p> <p>5 meeting to attend.</p> <p>6 Q. Okay.</p> <p>7 A. And I--so yes, I did.</p> <p>8 Q. How long were you--how long where you stayed away</p> <p>9 from work because of your foot injury?</p> <p>10 A. I was physically unable--I don't know the exact</p> <p>11 number of days. It's hard to give the exact number</p> <p>12 of days. I don't know.</p> <p>13 Q. Have you had a foot injury before this one?</p> <p>14 A. No.</p> <p>15 Q. How long were you on worker's comp.?</p> <p>16 A. Still involved with workmen's comp. for medical</p> <p>17 treatment.</p> <p>18 Q. How long were you out of work on worker's comp.?</p> <p>19 A. I was never paid compensation if that's what you're</p> <p>20 asking.</p> <p>21 Q. No, no, no. I'm asking--you weren't working for the</p> <p>22 company after your termination; is that right?</p> <p>23 A. Correct.</p> <p>24 Q. Sometime in April of 2003?</p>
<p style="text-align: right;">Page 30</p> <p>1 company?</p> <p>2 A. 19 months.</p> <p>3 Q. Do you claim in this case that you lost your job</p> <p>4 because of your foot injury?</p> <p>5 A. I lost my job--I guess I'm--can you rephrase the</p> <p>6 question, or can you--</p> <p>7 Q. Yes, I can try. Is it your claim in this case that</p> <p>8 somehow your foot injury made you lose your job?</p> <p>9 A. The result of my foot injury, yes, did cause me to</p> <p>10 lose my job, yes.</p> <p>11 Q. How's that? Can you explain that to me?</p> <p>12 A. Because my company did not want me to have a</p> <p>13 workmen's compensation case.</p> <p>14 Q. And when did you make your worker's compensation</p> <p>15 case?</p> <p>16 A. I was--the day after the accident I contacted our</p> <p>17 company office where they filed the claim for me.</p> <p>18 Q. Are you sure about that?</p> <p>19 A. I made the call the day after, yes.</p> <p>20 Q. To report your injury?</p> <p>21 A. Yes, to the department in our company that handled</p> <p>22 that.</p> <p>23 Q. But you returned to work shortly thereafter; is that</p> <p>24 right? You returned to your work shortly</p>	<p style="text-align: right;">Page 32</p> <p>1 A. Correct.</p> <p>2 Q. Then you were out of a job?</p> <p>3 A. Correct.</p> <p>4 Q. Didn't have a job to do; is that right?</p> <p>5 A. Correct.</p> <p>6 Q. You were receiving at that time worker's comp.; is</p> <p>7 that right?</p> <p>8 A. I was--I guess I don't--I need further definition of</p> <p>9 that. If I was receiving workmen's compensation as</p> <p>10 in the form of a compensation check during that time</p> <p>11 period?</p> <p>12 Q. Yes.</p> <p>13 A. No.</p> <p>14 Q. Have you ever received a worker's compensation check</p> <p>15 as a result of this incident?</p> <p>16 A. No. My medical expenses have been covered.</p> <p>17 Q. But not wage? Wages were not covered?</p> <p>18 A. No.</p> <p>19 Q. Between 2000 and 2003 you were treated for gout?</p> <p>20 A. Yes.</p> <p>21 Q. What is that?</p> <p>22 A. Apparently gout is--and I'm not a medical expert,</p> <p>23 but apparently it is an increased uric acid level in</p> <p>24 your blood system.</p>

<p style="text-align: right;">Page 33</p> <p>1 Q. And where is the pain? Where does the pain manifest 2 itself?</p> <p>3 A. In joints in your body.</p> <p>4 Q. And what joints manifested in your body?</p> <p>5 A. Big toe, ankle, knee, elbow, shoulder.</p> <p>6 Q. Big toe on both feet?</p> <p>7 A. Uh-huh.</p> <p>8 Q. Yes?</p> <p>9 A. Yes.</p> <p>10 Q. And where did you treat for that?</p> <p>11 A. That was my doctor in Cincinnati, and my doctor in 12 Syracuse.</p> <p>13 Q. So is it fair to characterize that gout manifests 14 itself as a pain in the foot?</p> <p>15 A. It can.</p> <p>16 Q. And it did in your case?</p> <p>17 A. Yes.</p> <p>18 Q. Did you take any medications between 2000-2003 for 19 gout?</p> <p>20 A. Yes.</p> <p>21 Q. Does it continue to bother you?</p> <p>22 A. No.</p> <p>23 Q. Since 2003 you had no episodes?</p> <p>24 A. No. Nor do I take medication for it either.</p>	<p style="text-align: right;">Page 35</p> <p>1 Q. Okay.</p> <p>2 A. I take Tricor for triglycerides. I take Effexor, 3 which is an anti-anxiety, which was prescribed by 4 Dr. Diaz as a result of the accident. I take 5 Kadian, which is a morphine for pain management.</p> <p>6 Q. For what pain?</p> <p>7 A. For my back and my foot. I take an MSIR, which is a 8 morphine sulfate instant release for breakthrough 9 pain. I take Atacand for blood pressure. I take 10 Verapamil also for blood pressure. Two different 11 approaches. I take an 81 milligram of aspirin, and 12 as needed I take Cialis for erectile dysfunction as 13 a result of the injuries and medication.</p> <p>14 Q. Did you take all these medications today that you 15 listed?</p> <p>16 A. I took the Atacand. Oh, I'm sorry, I also take 17 Xanax as well in conjunction. I took the Atacand, 18 the Tricor, and the 81 milligram this morning. The 19 Kadian I take at night, and the morphine sulfate as 20 needed. So I did not take any of those this 21 morning.</p> <p>22 Q. And did you take any anti-anxiety medications this 23 morning?</p> <p>24 A. The Effexor? No, I took it last night, midnight.</p>
<p style="text-align: right;">Page 34</p> <p>1 Q. And I'm sorry, who was the doctor that treated you 2 for that? Do you remember the name?</p> <p>3 A. That was Dr. Samaan.</p> <p>4 Q. Can you spell that?</p> <p>5 A. S-a-m-a-a-n. That was in Cincinnati and Dr. Diaz.</p> <p>6 Q. Cincinnati?</p> <p>7 A. Yes. Would you mind if I got up and walked around a 8 little bit?</p> <p>9 Q. No, not at all, not at all.</p> <p>10 A. I'm a little stiff sitting.</p> <p>11 MR. DURSO: For the record, the witness 12 has some medication that he takes, and he needs to 13 move around occasionally because of that.</p> <p>14 MR. CETKOVIC: That's fine.</p> <p>15 MR. DURSO: Do you want to take a break?</p> <p>16 A. Yeah, if we could just take a couple minutes, that 17 would be great.</p> <p>18 (Brief break.)</p> <p>19 Q. (Mr. Cetkovic) Are you currently on any medications?</p> <p>20 A. Yes.</p> <p>21 Q. What are you taking?</p> <p>22 A. I take--for--I take Zocor, Tricor.</p> <p>23 Q. What's Zocor for?</p> <p>24 A. Zocor is for cholesterol.</p>	<p style="text-align: right;">Page 36</p> <p>1 Q. And you said you take two Xanax and another one?</p> <p>2 A. I take a Xanax, and I take the Effexor, which are 3 both for anti-anxiety prescribed since the accident.</p> <p>4 Q. You did not have anti-anxiety medications before the 5 accident at any time, did you?</p> <p>6 A. I had them once, yes, for reflux.</p> <p>7 Q. What reflux?</p> <p>8 A. I had acid reflux. So they tried that as a method 9 to treat it, but that was back in '99, I believe, 10 '98, '99.</p> <p>11 MR. CETKOVIC: I think that's all I have.</p> <p>12 I may have some follow-ups. Thank you.</p> <p>13 CROSS EXAMINATION</p> <p>14 BY MR. LEEDBERG:</p> <p>15 Q. Good morning, Mr. Koran. Is it Koran or Koron?</p> <p>16 A. Koran.</p> <p>17 Q. Good morning. My name is Mike Leedberg. I 18 represent the Town of Sherborn in the lawsuit that 19 you've brought against them. I have a few questions 20 for you. First off, you listed some medications. 21 Just to be clear, have you taken any medications 22 today that might affect your ability to understand 23 my questions or answer them?</p> <p>24 A. No.</p>

10 (Pages 37 to 40)

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<p>1 Q. You've explained in some detail the auto accident 2 with Ms. Weaver, and you mentioned that the police 3 and ambulance personnel came to the scene after you 4 called 911; correct?</p> <p>5 A. Yes.</p> <p>6 Q. Do you recall having any conversations, first of 7 all, with the officer?</p> <p>8 A. There were two officers.</p> <p>9 Q. Okay. Do you recall having any conversation with 10 the officers?</p> <p>11 A. I did speak with them at the time they came, yes.</p> <p>12 Q. Do you recall specifically what you said?</p> <p>13 A. Verbatim, no.</p> <p>14 Q. Can you give me a general idea of the nature of the 15 conversation?</p> <p>16 A. I was asked to describe the person that I was 17 involved in the traffic incident with, at which time 18 I provided the name, address, all of her information 19 that we had shared with each other during the time 20 of our exchange of insurance information.</p> <p>21 Q. And do you recall having any conversations with 22 the EMTs?</p> <p>23 A. Quite a few actually.</p> <p>24 Q. Okay. Can you describe those for me?</p>	<p>1 A. It was just a sharp pain because he had bumped into 2 it.</p> <p>3 Q. Was there any other increased pain as a result of 4 that?</p> <p>5 A. As a result of him bumping into it? At that point 6 no.</p> <p>7 Q. At any point?</p> <p>8 A. He just--he put ice back on the--he put ice on it, 9 so no.</p> <p>10 Q. So it was just that one fleeting exacerbation, and 11 then that was it?</p> <p>12 A. When he bumped into it, yes.</p> <p>13 Q. Any other conversations with the gentleman in the 14 back?</p> <p>15 A. I asked them to contact the folks that were in the 16 restaurant and to let them know that I would not be 17 joining them for dinner because they initially had 18 said--you know, at first they said, "It's up to you, 19 if you want to go to the hospital," and I said, 20 "Well, my foot is killing me. I think I need to be 21 x-rayed. I don't know what's wrong with my foot." 22 So they said, "Well, that's up to you. We'll be 23 glad to take you there." But I had asked them to go 24 get the folks from the restaurant that I was joining</p>
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<p>1 A. Well, initially when they got there, there were 2 three of them that arrived at the scene because they 3 were telling me they were involved in a training 4 session. So the supervisor came to observe because 5 the two paramedics had both been away from active 6 calls for nearly six months. So he came to observe.</p> <p>7 Q. Do you recall any other conversation?</p> <p>8 A. With the paramedic that was in the back of the 9 ambulance with me on the way to the hospital who 10 kept bumping my foot every time he tried--in trying 11 to put ice, he tripped over the end of the gurney at 12 one point and bumped into my foot. While he was in 13 the back, he said, "You've got to forgive me. I'm a 14 little bit out of practice."</p> <p>15 Q. Do you know that person's name?</p> <p>16 A. No.</p> <p>17 Q. What did he look like?</p> <p>18 A. At this point I don't remember.</p> <p>19 Q. Did he in any way injure your foot?</p> <p>20 A. He bumped into it. I don't believe he injured it, 21 but he didn't make it feel better.</p> <p>22 Q. So it didn't increase your pain?</p> <p>23 A. It did at one point, yes.</p> <p>24 Q. And how long did that increased pain last?</p>	<p>1 for dinner, to let them know what was going on. 2 They brought them out so I could have a conversation 3 with the people that worked for me.</p> <p>4 Q. Who did you speak to that worked for you?</p> <p>5 A. I spoke with Michael Mondoor (phonetic), who was 6 my--one of my regional sales managers, and I spoke 7 with one of the brokers who came out, Jeff Cotton.</p> <p>8 Q. Jeff Cott?</p> <p>9 A. Cotton, C-o-t-t-o-n.</p> <p>10 Q. Describe the conversations you had with 11 Mr. Mondoor (phonetic) and Mr. Cotton?</p> <p>12 A. They came out and said, you know, "What happened?" 13 I said, "It's a long story, but can you let the 14 folks know that I won't be joining them for dinner. 15 If I do, it will be late. Get started. I'll join 16 you when I get there."</p> <p>17 Q. As a result of the auto accident, the actual impact 18 with Ms. Weaver's vehicle, did you suffer any 19 injuries as a result of that?</p> <p>20 A. Yes, my left foot.</p> <p>21 Q. No. I'm just talking about the impact with the 22 vehicle, between the two vehicles?</p> <p>23 A. Oh, no.</p> <p>24 Q. Did you feel any back pain after she ran over your</p>



Page 41	Page 43
<p>1 foot?</p> <p>2 A. No.</p> <p>3 Q. Did you feel any back injury of any type?</p> <p>4 A. No.</p> <p>5 Q. Any discomfort?</p> <p>6 A. In my back, no.</p> <p>7 Q. Describe the procedure as far as how they got you</p> <p>8 into the ambulance?</p> <p>9 A. They helped me step into it on my own. They helped</p> <p>10 me up one person on each arm, and they had me step</p> <p>11 up into the back.</p> <p>12 Q. And how did you get onto the cot?</p> <p>13 A. They had me sit down on it, and they helped me sit</p> <p>14 down. They had the back angled at about a 45 degree</p> <p>15 angle, and they helped me sit down on the cot, and</p> <p>16 then that's when they removed my shoe and sock to</p> <p>17 examine my foot.</p> <p>18 Q. At any point did you become fully--did you lay down</p> <p>19 on the cot?</p> <p>20 A. No.</p> <p>21 Q. So you sat on the cot the entire way?</p> <p>22 A. Yes.</p> <p>23 Q. And did your position change at any point as far as</p> <p>24 on the cot?</p>	<p>1 A. No.</p> <p>2 Q. It seems so in the police report that Ms. Weaver</p> <p>3 told the officer that you were hostile and flailing</p> <p>4 your arms about at the scene of the accident, and</p> <p>5 that's why she left. What would you say to that</p> <p>6 statement?</p> <p>7 A. I would say that it was actually the other way</p> <p>8 around.</p> <p>9 Q. So Ms. Weaver is lying?</p> <p>10 A. I believe that the statement is not correct.</p> <p>11 Q. At any point did you have a conversation with any of</p> <p>12 the EMTs about an anger management problem?</p> <p>13 A. No.</p> <p>14 Q. Have you ever sought treatment for anger management?</p> <p>15 A. No.</p> <p>16 Q. Never sought counselling for anger management?</p> <p>17 A. No, I've seen counselling for my marriage.</p> <p>18 Q. When was that?</p> <p>19 A. In 2002.</p> <p>20 Q. Who did you seek counselling with?</p> <p>21 A. I don't remember the name of the doctor, but it was</p> <p>22 a result of our transitional move. My wife just</p> <p>23 recently having a baby, and a lot of pressures in</p> <p>24 the household. So somebody to talk to as a neutral</p>
Page 42	Page 44
<p>1 A. My seated position?</p> <p>2 Q. No. At some point you were strapped into the cot,</p> <p>3 were you not?</p> <p>4 A. Yes.</p> <p>5 Q. When was that?</p> <p>6 A. When we were getting ready to leave the parking lot</p> <p>7 and head towards the hospital, but I was left in the</p> <p>8 same seated position that I had been in.</p> <p>9 Q. But your feet were up on the cot as well? You</p> <p>10 weren't sitting off to the side?</p> <p>11 A. Right. That's right.</p> <p>12 Q. Describe the cot for me? Does it have a mattress or</p> <p>13 a cushion?</p> <p>14 A. It had some type of cushion that was covered with a</p> <p>15 white sheet.</p> <p>16 Q. Do you know how thick that cushion was?</p> <p>17 A. I have no idea.</p> <p>18 Q. Do you know how tall the cot was when it was in its</p> <p>19 position in the back?</p> <p>20 A. I would estimate six to eight inches from the floor</p> <p>21 to the bottom area, and then the mattress or cushion</p> <p>22 was on top of that.</p> <p>23 Q. Were there any signs or problems with the cot at any</p> <p>24 point while you were on your way to the hospital?</p>	<p>1 setting.</p> <p>2 Q. Where were they located?</p> <p>3 A. In Syracuse.</p> <p>4 Q. Do you remember the name of the facility?</p> <p>5 A. No.</p> <p>6 Q. Do you remember the address?</p> <p>7 A. It was near the North Medical Building,</p> <p>8 North Medical Center, which I believe is--it's hard</p> <p>9 to remember the names of the road now, but I think</p> <p>10 it was on--I want to say Taft Road, but I could be</p> <p>11 wrong on that. It's at the same North Medical</p> <p>12 Center which is where I had some procedures done.</p> <p>13 Q. Are they affiliated with North Medical?</p> <p>14 A. I don't know. I don't remember if they were or not.</p> <p>15 Q. How did you pay for the counselling?</p> <p>16 A. It was through my insurance.</p> <p>17 Q. What was your insurance carrier at the time?</p> <p>18 A. I don't remember who my insurance--I think it was</p> <p>19 BlueCross BlueShield of Minnesota is who we had.</p> <p>20 Q. What kind of problems were you having as a result of</p> <p>21 these pressures that you've describe that you sought</p> <p>22 out counselling for?</p> <p>23 A. My wife and I just--you know, it was just the--we</p> <p>24 had moved for the second time in a couple of years.</p>



12 (Pages 45 to 48)

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<p>1 We had just had our second child. She had just lost</p> <p>2 her father. He passed away. I lost my father only</p> <p>3 a few years before. A lot of life changing</p> <p>4 experiences that resulted in some pressures.</p> <p>5 Q. Okay. I understand the cause. What was the result?</p> <p>6 Were you fighting?</p> <p>7 A. We had some disagreements. We had a difficult time</p> <p>8 communicating with each other effectively. We were</p> <p>9 both at times sleep deprived from the baby early on</p> <p>10 because he refused to sleep early in his life, and</p> <p>11 he was born in May of 2002. So there were just</p> <p>12 minor things that came out of that, and I just</p> <p>13 needed someone to talk to outside of the house, and</p> <p>14 I didn't want to confide in work associates because</p> <p>15 I didn't think it was appropriate.</p> <p>16 Q. Okay. Were these disagreements? Were they heated?</p> <p>17 A. How would you define heated?</p> <p>18 Q. Yelling, screaming, swearing?</p> <p>19 A. Our household can be loud. So we talk sometimes at</p> <p>20 a louder--you know, with the kids yelling, we try to</p> <p>21 talk over the top of them. So I guess it could be</p> <p>22 defined as talking loudly, but you know, it's</p> <p>23 probably no different than any other household.</p> <p>24 Q. Then why would that require counselling?</p>	<p>1 we did not. Independently we went to counselling to</p> <p>2 strengthen our marriage so that we didn't get to a</p> <p>3 point where we needed to go at that level.</p> <p>4 Q. And what did the treatment for counselling entail?</p> <p>5 A. Just conversation.</p> <p>6 Q. No medications?</p> <p>7 A. No.</p> <p>8 Q. And your wife was seeking counselling for the same</p> <p>9 issues?</p> <p>10 A. She had some personal issues from her childhood that</p> <p>11 she needed to work out with her counselor.</p> <p>12 Q. Was it a counselor or a psychiatrist?</p> <p>13 A. It's a psychiatrist.</p> <p>14 Q. Was your wife on any medications for any--</p> <p>15 A. No.</p> <p>16 Q. You mentioned earlier that you had taken Effexor,</p> <p>17 and I think you estimated 1999, 2000; correct?</p> <p>18 A. Right, for my reflux.</p> <p>19 Q. Were you taking Effexor as of the time of this</p> <p>20 incident?</p> <p>21 A. Not that I remember.</p> <p>22 Q. Not that you remember?</p> <p>23 A. I don't remember.</p> <p>24 Q. You don't remember if you were taking a medicine at</p>
Page 46	Page 48
<p>1 A. I just had never dealt with myself dealing with the</p> <p>2 change in job, moving twice, losing my father, and</p> <p>3 then her losing her father who I was also close to,</p> <p>4 and she also was going to counselling as well, and</p> <p>5 we just felt that it would be appropriate for</p> <p>6 ourselves to talk to third-party folks that may</p> <p>7 have--just, you know, somebody to talk to.</p> <p>8 Q. Okay.</p> <p>9 A. It was an opinion that we had through insurance that</p> <p>10 was cost effective to vent our thoughts and</p> <p>11 basically not be judged for them.</p> <p>12 Q. Did the disagreements between you and your wife ever</p> <p>13 get physical?</p> <p>14 A. No.</p> <p>15 Q. Were the police ever called--</p> <p>16 A. No.</p> <p>17 Q. --as a result of any of those disagreements?</p> <p>18 A. No.</p> <p>19 Q. You said she was already in counselling?</p> <p>20 A. She had started around the same time that I did.</p> <p>21 Q. Independently of the marriage counselling that you</p> <p>22 guys sought?</p> <p>23 A. We didn't go together as marriage counselling, no.</p> <p>24 We did not go to marriage counselling together. No,</p>	<p>1 the time the accident?</p> <p>2 A. No, I don't.</p> <p>3 Q. Were you taking any medications at all at the time</p> <p>4 of this incident in 2003?</p> <p>5 A. No.</p> <p>6 Q. You don't remember, or you weren't taking any?</p> <p>7 A. I don't believe I was taking any medications at that</p> <p>8 time. If anything, it was related to my gout, which</p> <p>9 you know, the maintenance for those at the time.</p> <p>10 MR. LEEDBERG: Can I mark this</p> <p>11 Defendant's 1, please?</p> <p>12 (The MetroWest Medical System records were</p> <p>13 marked Exhibit No. 1 for identification.)</p> <p>14 Q. I'm going to show you a document that I just had</p> <p>15 marked as Defendant's 1, and on the first page of</p> <p>16 that document I'll represent to you that this is the</p> <p>17 records we received from MetroWest Medical System as</p> <p>18 a result of an inquiry to them. I want you to look</p> <p>19 towards the upper left-hand corner where it says,</p> <p>20 "Current medication." Do you see that area?</p> <p>21 A. Uh-huh.</p> <p>22 Q. Can you read those off for me?</p> <p>23 A. Allopurinol, Norvasc, Effexor, and Trazadone.</p> <p>24 Q. Were you taking Effexor at that time?</p>

<p style="text-align: right;">Page 49</p> <p>1 A. According to this, yes.</p> <p>2 Q. And what was that for?</p> <p>3 A. It was probably still related to my reflux.</p> <p>4 Q. I thought you said that was in 1999 or 2000?</p> <p>5 A. That's when I began that, yes.</p> <p>6 Q. What were you taking Trazadone for?</p> <p>7 A. That was because I had difficulty sleeping.</p> <p>8 Q. Who prescribed those two drugs for you?</p> <p>9 A. Dr. Diaz.</p> <p>10 Q. Where did you have those prescriptions filled?</p> <p>11 A. Where?</p> <p>12 Q. Yeah. Where did you routinely, if any, locations</p> <p>13 were you routinely had your prescriptions filled?</p> <p>14 A. In Syracuse Kinney Drug.</p> <p>15 Q. Kinney Drug?</p> <p>16 A. Uh-huh.</p> <p>17 Q. What's the address of that facility?</p> <p>18 A. It was on South Bay Road in Cicero.</p> <p>19 Q. Any other pharmacies were you'd routinely fill your</p> <p>20 prescriptions?</p> <p>21 A. That was our primary. I think later on before we</p> <p>22 moved we used a--there was another--Eckerd.</p> <p>23 Eckerd Drug, which was right up the street from</p> <p>24 Kinney. If something was not in inventory in</p>	<p style="text-align: right;">Page 51</p> <p>1 A. Backed up to the emergency room door. The driver of</p> <p>2 the ambulance came and opened the back door. The</p> <p>3 gentleman who was sitting in the ambulance with me</p> <p>4 switched places with him where he got on the</p> <p>5 outside, and the driver then got on the inside and</p> <p>6 was behind me. They were talking to each other. I</p> <p>7 was sitting. Apparently they were unlocking the</p> <p>8 gurney from whatever was holding it in place while I</p> <p>9 was in the ambulance, and the gentleman at my feet</p> <p>10 said, "You ready?" He said, "Yep." He says, "Let's</p> <p>11 go," and he started walking me out. He said, "You</p> <p>12 got him," and he says, "Yep," and the next thing I</p> <p>13 know I was slammed to the ground, and they like,</p> <p>14 "Oh, gee, we're sorry." They said, "Are you okay?"</p> <p>15 I said, "Well, that didn't feel very good," and then</p> <p>16 they started to fumble with the gurney to try to</p> <p>17 lift it up, and it went on for what seemed like five</p> <p>18 minutes of doing this, and it was a very, very cold</p> <p>19 night, and I asked if we could take this inside</p> <p>20 because I was freezing. I had no coat on and was</p> <p>21 sitting outside, and it was probably five degrees</p> <p>22 outside, and they said, "That's fine," and they</p> <p>23 wheeled me into the ER with the wheels--with the</p> <p>24 legs of the gurney not extended where I was sitting</p>
<p style="text-align: right;">Page 50</p> <p>1 Kinney, typically Eckerd inventories it.</p> <p>2 Q. So it's your testimony today that you were taking</p> <p>3 Effexor for over three years for a reflux problem?</p> <p>4 A. Yes.</p> <p>5 Q. Was it working?</p> <p>6 A. It was.</p> <p>7 Q. When did you stop taking Effexor for reflux problem?</p> <p>8 A. When the pain management decided that they wanted to</p> <p>9 double it to use because of the amount of pain</p> <p>10 medication they were going to give me. They doubled</p> <p>11 it because of the amount of pain medication they</p> <p>12 gave me. So apparently--I never--I wouldn't have</p> <p>13 been off of it at that point.</p> <p>14 Q. Did you ever suffer from depression?</p> <p>15 A. I was--I wouldn't say clinically depressed, no.</p> <p>16 Q. Did you ever seek treatment for depression?</p> <p>17 A. I wouldn't say--no, not--I mean, treatmentwise, no.</p> <p>18 Q. Have you ever been diagnosed with depression?</p> <p>19 A. No.</p> <p>20 Q. Back to the ride in the ambulance. Approximately</p> <p>21 how long did it take you to get to the hospital?</p> <p>22 A. I don't know the exact time, but I would estimate</p> <p>23 ten to twelve minutes.</p> <p>24 Q. And describe for me what happened at the hospital?</p>	<p style="text-align: right;">Page 52</p> <p>1 just six inches off the ground basically.</p> <p>2 Q. Did they pull you all the way out before they</p> <p>3 dropped you down?</p> <p>4 A. Yes.</p> <p>5 Q. Do you recall hearing anything before you were</p> <p>6 dropped?</p> <p>7 A. Just the one gentleman saying, "Do you have him? Do</p> <p>8 you got him," and he said, "Yep," and the next thing</p> <p>9 I know I hit the ground.</p> <p>10 Q. Did you hear any noises coming from the cot?</p> <p>11 A. I don't recall any noises at all.</p> <p>12 Q. Did it seem like there was anything wrong with the</p> <p>13 cot to you at that point?</p> <p>14 A. I had never been on it, so I couldn't judge if there</p> <p>15 was anything right or wrong. I had never been on a</p> <p>16 cot in that situation.</p> <p>17 Q. But did you perceive anything that might have given</p> <p>18 you an indication that there was something wrong</p> <p>19 with the cot?</p> <p>20 A. Not at all.</p> <p>21 Q. Do you know if the wheels to the cot touched the</p> <p>22 ground before you were dropped?</p> <p>23 A. I don't believe the wheels did. I think that--I</p> <p>24 mean, that was the issue, was if the wheels had come</p>

14 (Pages 53 to 56)

<p style="text-align: right;">Page 53</p> <p>1 down, then it wouldn't have dropped that way.</p> <p>2 Q. Is that an assumption you're making?</p> <p>3 A. That's based on what they were saying to each other,</p> <p>4 that the legs didn't disengage. They were locked in</p> <p>5 place.</p> <p>6 Q. What exactly did they say in that regard?</p> <p>7 A. Verbatim, I don't have the--I don't know verbatim,</p> <p>8 but I remember them talking about, you know, "I</p> <p>9 can't believe these legs didn't come down," or</p> <p>10 something along that line, and they kept fumbling</p> <p>11 with trying to--it sounded like they were trying to</p> <p>12 unclick something, and that's when I said, "Can we</p> <p>13 move this inside?"</p> <p>14 Q. Do you recall them saying anything about the legs to</p> <p>15 the cot not locking properly?</p> <p>16 A. They could not get the legs to come up. I don't</p> <p>17 know that they said anything about them not locking.</p> <p>18 They said they could not get the legs up to extend.</p> <p>19 Q. And if the EMEs--the EMTs were to testify that the</p> <p>20 legs did come down, the wheels did touch the ground,</p> <p>21 and they just didn't lock into place, is that</p> <p>22 accurate?</p> <p>23 A. Based on the way I hit the ground, my interpretation</p> <p>24 would be no, that's not accurate.</p>	<p style="text-align: right;">Page 55</p> <p>1 Q. You can't testify as to where they were looking at</p> <p>2 the time you were allegedly dropped?</p> <p>3 A. No.</p> <p>4 Q. Can you estimate what the height was that you were</p> <p>5 dropped?</p> <p>6 A. The back of an ambulance, from that level to the</p> <p>7 ground, which I would estimate being anywhere like</p> <p>8 36 inches.</p> <p>9 Q. Did you feel any pain as a result of being dropped?</p> <p>10 A. I felt a--what felt like a shock wave running</p> <p>11 through my back and legs. It wasn't a pain. It was</p> <p>12 kind of like an electrical shock, if you will.</p> <p>13 Q. And did you tell anybody about that?</p> <p>14 A. I told the nurse when I got inside. I told the</p> <p>15 EMTs. I said--they said, "Are you all right?" I</p> <p>16 said, "That did not feel good," and as they were</p> <p>17 fumbling everything, I said, "It felt like shock</p> <p>18 waves running through. Shocks running through my</p> <p>19 legs and back," and they just continued to fumble</p> <p>20 with the cot to try to get it to stand up. So then</p> <p>21 I mentioned it to the nurse. I said, "Listen, when</p> <p>22 they dropped me, I felt these shock waves through my</p> <p>23 back," and she said, "You weren't brought in here</p> <p>24 for your back. You were brought in here for your</p>
<p style="text-align: right;">Page 54</p> <p>1 Q. Describe that for me? How do you come to that</p> <p>2 conclusion about based on the way you hit the</p> <p>3 ground?</p> <p>4 A. Because as I came--it was basically a free fall. I</p> <p>5 mean, there was no sound, and then all of a sudden I</p> <p>6 smacked the ground. So I would think if there were</p> <p>7 legs, I would have heard something on the ground,</p> <p>8 and it would have sounded like something closing as</p> <p>9 opposed to just no sound and then hitting.</p> <p>10 Q. What were your eyes fixated on as you were being--do</p> <p>11 you recall looking at anything in particular as you</p> <p>12 were being unloaded from the--</p> <p>13 A. I was just kind of looking around getting my</p> <p>14 bearings as to where I was, you know, at the</p> <p>15 hospital, and looking to see if the--because he had</p> <p>16 wrapped an Ace bandage around the ice pack. I</p> <p>17 looked down at the ice pack on my foot to see if</p> <p>18 that was slipping or anything. I was just looking</p> <p>19 at that, and the next thing I know I was falling.</p> <p>20 Q. Did you look at the EMTs at any point?</p> <p>21 A. I don't remember looking at them, no.</p> <p>22 Q. So you can't testify as to where they were looking</p> <p>23 as you were being unloaded?</p> <p>24 A. No, I can't.</p>	<p style="text-align: right;">Page 56</p> <p>1 foot," and I said, "Well, can you look at my--can</p> <p>2 somebody look at my back," and she said, "No." I</p> <p>3 said, "Why?" And she said, "Because you weren't</p> <p>4 brought in here for that. You were brought in here</p> <p>5 to have me look at your foot. If you want to have</p> <p>6 your back examined, you need to essentially come</p> <p>7 back in, and we can do that."</p> <p>8 Q. The nurse said that?</p> <p>9 A. Yeah, which I said, "I don't understand why."</p> <p>10 Q. That's very unusual.</p> <p>11 A. Yeah, that's what I thought.</p> <p>12 Q. Did you tell the EMTs that you specifically felt</p> <p>13 pain in your back or your legs?</p> <p>14 A. I told them that I felt shock, like an electrical</p> <p>15 shock run through me.</p> <p>16 MR. LEEDBERG: Can I have that marked as</p> <p>17 Defendant's 2, please?</p> <p>18 (The Sherborn Fire Department record was</p> <p>19 marked Exhibit No. 2 for identification.)</p> <p>20 Q. I'm going to show you a document in which I've had</p> <p>21 marked as Defendant's Exhibit 2. I'm going to ask</p> <p>22 you to take a look at it while I get copies for</p> <p>23 counsel.</p> <p>24 (Discussion off the record.)</p>



<p style="text-align: right;">Page 57</p> <p>1 Q. Have you had a chance to read that?</p> <p>2 A. Uh-huh, yes.</p> <p>3 Q. What would you say about the narrative under</p> <p>4 "comments"?</p> <p>5 A. I would say that there is an inaccurate statement</p> <p>6 with the fact that it was "the stretcher appeared to</p> <p>7 gradually release to a lower position," and "asked</p> <p>8 if he was okay" stating that I had no injury is</p> <p>9 false.</p> <p>10 Q. So it's your testimony here today that the EMT put</p> <p>11 two blatantly false statements in his formal report?</p> <p>12 A. Yes, it is.</p> <p>13 MR. LEEDBERG: Can I mark this as the next</p> <p>14 exhibit?</p> <p>15 (The Sherborn Fire &amp; Rescue Department</p> <p>16 report was marked Exhibit No. 3 for identification.)</p> <p>17 Q. I'll show you the incident report from the</p> <p>18 Fire &amp; Rescue Department, and ask you to read the</p> <p>19 description of incident in that.</p> <p>20 A. "When unloading patient out of ambulance the</p> <p>21 stretcher did not stay up in lock mode and went down</p> <p>22 to the ground. Patient was not injured." That's</p> <p>23 false.</p> <p>24 Q. And Mr. Christensen appears to be the individual</p>	<p style="text-align: right;">Page 59</p> <p>1 A. I have no idea.</p> <p>2 Q. Do you know these people?</p> <p>3 A. No.</p> <p>4 Q. One of your children was born after the incident;</p> <p>5 correct?</p> <p>6 A. Yes.</p> <p>7 Q. Do you recall any treatment you may have had with</p> <p>8 Dr. Diaz in the year preceding this incident?</p> <p>9 A. Regarding?</p> <p>10 Q. Anything?</p> <p>11 A. I saw Dr. Diaz for, you know, routine medical</p> <p>12 checks. We had--I had--if I had a gout flare-up, I</p> <p>13 saw him for that.</p> <p>14 Q. Anything else in particular you recall that you saw</p> <p>15 Dr. Diaz for for the year leading up to--</p> <p>16 A. I don't recall. I've seen a lot of doctors since</p> <p>17 then, so it's hard to remember.</p> <p>18 Q. Do you recall receiving an injection in</p> <p>19 December of '02 of any kind?</p> <p>20 A. An injection in December? For?</p> <p>21 Q. Anything at all? I'll represent to you that I have</p> <p>22 a billing document from Dr. Diaz's office that the</p> <p>23 insurance company was billed for an injection of</p> <p>24 Topomil (phonetic). Do you recall having an</p>
<p style="text-align: right;">Page 58</p> <p>1 that filled out this report. Again, he falsely</p> <p>2 stated what happened as far as your injuries in his</p> <p>3 formal report?</p> <p>4 A. Yes.</p> <p>5 Q. I've read the West End report that we've had marked</p> <p>6 as Defendant's 1, and I'll ask you this, and if you</p> <p>7 want to take a look at it, feel free to do so before</p> <p>8 you answer. Can you explain to me why none of your</p> <p>9 conversations with the nurse is found in any of</p> <p>10 those records regarding your back?</p> <p>11 A. I don't know. It would probably be the same thing</p> <p>12 as to why I was not even given something as simply</p> <p>13 as an Advil or a Tylenol for pain while I was there</p> <p>14 when I asked for it, and I was denied.</p> <p>15 Q. So it's your testimony that both EMTs lied about</p> <p>16 your denying injury from the cot incident, and the</p> <p>17 nurse didn't put anything about the back injury in</p> <p>18 the notes? That's your testimony?</p> <p>19 A. Yes.</p> <p>20 Q. It seems like quite a conspiracy. Can you give me</p> <p>21 an idea of why that is?</p> <p>22 MR. DURSO: Objection to the form of the</p> <p>23 question.</p> <p>24 Q. Can you explain to me why they might do that?</p>	<p style="text-align: right;">Page 60</p> <p>1 injection?</p> <p>2 A. It may have been for a gout flare-up.</p> <p>3 Q. So you would get injections for gout?</p> <p>4 A. I had them a number of times. They would inject</p> <p>5 steroids right into the inflamed joint to relieve</p> <p>6 the pressure and relieve the pain.</p> <p>7 Q. But do you recall specifically having one of those</p> <p>8 injections a couple of months before the accident?</p> <p>9 A. I had a number of them, so I don't remember if there</p> <p>10 was one prior to this incident or not. I don't</p> <p>11 remember.</p> <p>12 Q. Dr. Diaz would administer those injections right at</p> <p>13 his office?</p> <p>14 A. Yes.</p> <p>15 Q. Describe for me the pain in your back from the time</p> <p>16 you were at West End to the time you first sought</p> <p>17 treatment with Dr. Diaz such as the location of the</p> <p>18 pain in your body; the frequency you'd experience</p> <p>19 the pain; and the level of pain?</p> <p>20 A. From the time I was at the hospital it began where</p> <p>21 it was just very--the pain was minor at that point</p> <p>22 from the standpoint that I felt like small shock</p> <p>23 waves that I didn't think a lot about it, but I</p> <p>24 thought something didn't seem right, and that's why</p>

16 (Pages 61 to 64)

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<p>1 I brought it to the attention of the nurse and asked</p> <p>2 to have it looked at. The next morning when I got</p> <p>3 up I had discomfort when I woke up, but my foot was</p> <p>4 so sore from the injury that I was more focussed on</p> <p>5 my foot than I was on my back, but I noticed that I</p> <p>6 was rather stiff in getting up. When I arrived back</p> <p>7 with my family at the location where we were on</p> <p>8 Friday night and Saturday night visiting family and</p> <p>9 relatives, I had been riding in the car a good part</p> <p>10 of the day driving through a snow storm, and I</p> <p>11 had--was very uncomfortable when I got back, and</p> <p>12 just I had discomfort in my lower back to the point</p> <p>13 where it was--I just felt stiff. I felt like I</p> <p>14 didn't have a lot of flexibility, and the next</p> <p>15 morning when I got up, I had a difficult time</p> <p>16 getting up. My back was extremely sore at that</p> <p>17 point.</p> <p>18 Q. What morning was that?</p> <p>19 A. That was Saturday morning. The incident happened on</p> <p>20 Thursday evening. So Saturday morning it was</p> <p>21 starting to really bother me, and throughout the day</p> <p>22 the pain started to get more and more and was</p> <p>23 actually increasing to the point where it was more</p> <p>24 noticeable than the pain in my foot, which was</p>	<p>1 preceded the increase in pain?</p> <p>2 A. No. I had--we were visiting family and relatives,</p> <p>3 and there were a lot of my wife's cousins and such</p> <p>4 that were playing with the kids, so I didn't have to</p> <p>5 attend to getting on the floor with the kids. I</p> <p>6 didn't have to change diapers. I didn't have to</p> <p>7 carry the kids around, none of the things that I</p> <p>8 would do in a normal routine, which was good because</p> <p>9 then I didn't have to worry about, you know, if it</p> <p>10 was going to aggravate things at that point. So I</p> <p>11 really didn't have to actually participate in</p> <p>12 anything like that until we got home on Sunday</p> <p>13 night, which I wasn't able to participate in at that</p> <p>14 point.</p> <p>15 Q. Where was this location where you were visiting in--</p> <p>16 A. Avon, Connecticut.</p> <p>17 Q. In Avon?</p> <p>18 A. Uh-huh.</p> <p>19 Q. What was the name of the family you were visiting?</p> <p>20 A. My wife's family, the Somsen Family, her</p> <p>21 grandmother, who is now deceased, Janet Somsen, and</p> <p>22 her aunts, uncles, cousins.</p> <p>23 Q. What are their names?</p> <p>24 A. There are quite of few of them. There was--you want</p>
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<p>1 fairly aggravated at that point still as well.</p> <p>2 Sunday, as I drove back to New York, it felt as if I</p> <p>3 had a golf ball in the small of my back that as I</p> <p>4 sat back, I could feel this golf ball, and no matter</p> <p>5 how I sat, I just felt this pressure and pain of</p> <p>6 this golf ball type feeling in my back that made my</p> <p>7 legs very uneasy to the point where I said to my</p> <p>8 wife, "If we have to drive much further, I want you</p> <p>9 to drive because I just don't feel comfortable."</p> <p>10 And we got home, and I put ice on it again, which I</p> <p>11 had done a couple days in a row just to try to help</p> <p>12 relieve some of the discomfort. So the next morning</p> <p>13 I got up, and I called Dr. Diaz and asked to come in</p> <p>14 there, and I had a conference call that I jumped on</p> <p>15 for 45 minutes and then jumped off and went straight</p> <p>16 to his office then at that point at which time he</p> <p>17 administered an injection to relieve--he gave me</p> <p>18 Demerol to relieve the pain and did a couple of</p> <p>19 steroid injections into the area where I had the</p> <p>20 discomfort to see if that would help relieve the</p> <p>21 pain there, and then he sent me for x-rays and such.</p> <p>22 So the pain had really increased, just progressively</p> <p>23 got worse.</p> <p>24 Q. Was there any event during those few days that</p>	<p>1 the complete list of everybody?</p> <p>2 Q. Who you can recall there?</p> <p>3 A. Well, let's see, there was my wife's brother, Glen,</p> <p>4 his wife, who is now his ex-wife, which was Christy,</p> <p>5 his two children, Kaylee and Matthew.</p> <p>6 Q. What are their last names?</p> <p>7 A. Somsen. It was my wife's maiden name.</p> <p>8 Q. Can you spell that for me?</p> <p>9 A. S-o-m, as in Mary, s-e-n, as in Nancy.</p> <p>10 Q. Are they from Connecticut as well?</p> <p>11 A. The Somsen Family grew up in the Connecticut area.</p> <p>12 My wife did not grow up in this area. She grew up</p> <p>13 in Ohio.</p> <p>14 Q. And other Somsens, do they live in Connecticut?</p> <p>15 A. They're--Janet Somsen, her grandmother, lived in</p> <p>16 Connecticut. Her biological father lived in--lives,</p> <p>17 I guess, in Holyoke, Massachusetts. He's estranged</p> <p>18 from the family.</p> <p>19 Q. What about the brother and the ex-wife and the kids?</p> <p>20 A. They, at the time, were living in</p> <p>21 Upstate New York--well, just outside of New York</p> <p>22 City in Upstate, but they're divorced, and they live</p> <p>23 in Atlanta.</p> <p>24 Q. Atlanta, Georgia?</p>



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<p>1 A. Yes.</p> <p>2 (Discussion off the record.)</p> <p>3 Q. Who else was at the house that weekend?</p> <p>4 A. Her Aunt Jean, which her last name is Connell, and</p> <p>5 her daughter, Katie Connell. Her Aunt Jane with her</p> <p>6 two daughters, Emily and Ellen, and their last name</p> <p>7 is Strong. Her Uncle Paul Zavarcky.</p> <p>8 Q. Can I just interject for one minute? If you know</p> <p>9 their address, could you give that as well?</p> <p>10 A. Okay. The Connells at the time were living in</p> <p>11 Sparta, New Jersey.</p> <p>12 Q. Where are they living now?</p> <p>13 A. They now live in--it's just outside of Sparta, but</p> <p>14 it's actually in Pennsylvania. I don't know the</p> <p>15 name of the little town, but then the Strongs live</p> <p>16 in West Hartford. The Rappaports, which was</p> <p>17 Danielle, Margo, Nicole, and her Aunt Joanne, who</p> <p>18 live in West Hartford as well. The Zavarckys live</p> <p>19 in Newton, Massachusetts, which was Judy and Paul.</p> <p>20 They were there.</p> <p>21 Q. Could you spell their last name for me?</p> <p>22 A. Z-a-v-a-r-c-k-y, and I believe that's all the folks</p> <p>23 that were there for the--and Janet Somsen. It was</p> <p>24 her house that everybody was visiting.</p>	<p>1 just observe and sit and talk with folks. I had a</p> <p>2 very quiet weekend. It was not--did not participate</p> <p>3 in any of the games and such or any of that type of</p> <p>4 activity. I never really participate in the games</p> <p>5 anyhow. It's not my thing.</p> <p>6 Q. Do you recall any specific conversations about this</p> <p>7 entire incident?</p> <p>8 A. Well, everybody that came in asked why I was wearing</p> <p>9 a boot, and I explained to them what had happened,</p> <p>10 and they were just, you know, people found humor in</p> <p>11 the fact that I got dropped. They found that</p> <p>12 humorous for some reason.</p> <p>13 Q. Did you mention your back injury to them?</p> <p>14 A. Yes, and they said that--they said, "Well, how does</p> <p>15 it feel now," and I said, "It seems to be getting</p> <p>16 worse," and they said, "Well, what are you going to</p> <p>17 do?" I said, "I'm going to see the doctor when I</p> <p>18 get home."</p> <p>19 Q. So you were injured, and they found that humorous?</p> <p>20 A. In a warped way, yes.</p> <p>21 Q. How did you leave the hospital that day?</p> <p>22 A. I was given a ride by one of the brokers staff</p> <p>23 members who happened to be visiting his mother. His</p> <p>24 name was Tom, and I don't remember his last name.</p>
Page 66	Page 68
<p>1 Q. Was this some kind of planned event?</p> <p>2 A. It was her Aunt Joanne, her cousin, Kate, and her</p> <p>3 grandmother all celebrating birthdays within a three</p> <p>4 week span of each other, and her brother, Glen, all</p> <p>5 within a three week span of each other celebrating</p> <p>6 birthdays, and it just happened to be a time that</p> <p>7 everybody was available to come to town and see each</p> <p>8 other.</p> <p>9 Q. What did the events of the weekend entail?</p> <p>10 A. A lot of playing the game Boggle, which was the</p> <p>11 grandmother's favorite game. Basically sitting</p> <p>12 around talking. The kids climbing on Uncle Paul,</p> <p>13 and him wrestling with them, and a number of</p> <p>14 conversations and preparing food and eating a lot.</p> <p>15 Typical family event.</p> <p>16 Q. Did you guys go out anywhere?</p> <p>17 A. No, stayed at the house. I mean, maybe we ran to</p> <p>18 the store to get some more food items, you know, for</p> <p>19 snacks and such.</p> <p>20 Q. Did you run to the store?</p> <p>21 A. No, I didn't leave the house.</p> <p>22 Q. What did you do all weekend?</p> <p>23 A. I was in the back bedroom laying down quite a bit.</p> <p>24 I would come out. I'd sit in a chair and kind of</p>	<p>1 He worked for the broker, which was</p> <p>2 Pilgrim's of New England, and he happened to be</p> <p>3 visiting his wife's mother at the hospital with his</p> <p>4 wife, was walking through the ER to leave, looked</p> <p>5 over and saw me sitting in one of the rooms, and</p> <p>6 came in and had a conversation, you know, "What's</p> <p>7 going on," and was actually in there at part of the</p> <p>8 time when I was having the conversation about my</p> <p>9 back with the nurse, and then he left, you know,</p> <p>10 while I was in the midst of conversation because he</p> <p>11 felt that it was a private conversation, went out,</p> <p>12 and was making phone calls outside. He came back in</p> <p>13 and asked if I needed a ride back to the inn, in</p> <p>14 which I said, "That would be great." So he gave me</p> <p>15 a ride back to the inn at that point because they</p> <p>16 said that I was finished. There was nothing else</p> <p>17 they could do for me.</p> <p>18 Q. You don't know Tom's last name?</p> <p>19 A. I don't remember it, but I'm sure the folks at</p> <p>20 Pilgrim's of New England, if you called Tom Hill or</p> <p>21 Rich Hill and asked them the gentleman, they would</p> <p>22 know exactly what his name was.</p> <p>23 Q. How old is Tom approximately?</p> <p>24 A. Tom is probably late 30s.</p>

20 (Pages 77 to 80)

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<p>1 management doctors.</p> <p>2 Q. Did you see a urologist at any point?</p> <p>3 A. I did go see a urologist.</p> <p>4 Q. Do you remember the person's name?</p> <p>5 A. I don't remember his name. I apologize, but I did</p> <p>6 have--I was--I did go see the urologist. He</p> <p>7 indicated--he did a number of tests indicating to me</p> <p>8 that as he explained to me, he didn't see that there</p> <p>9 was anything physically wrong. So he said it had to</p> <p>10 be medication related based on the physical tests</p> <p>11 that they did, looking for blockages, looking for</p> <p>12 restrictions and such through all the examinations</p> <p>13 that they did. His determination was that it was</p> <p>14 medication-driven.</p> <p>15 Q. Did you ever have any sexual dysfunction of any kind</p> <p>16 prior to the incident?</p> <p>17 A. No.</p> <p>18 Q. Dr. Harvey Sour (phonetic); does that sound? Is</p> <p>19 that the urologist you saw?</p> <p>20 A. That sounds correct, yeah.</p> <p>21 Q. Have you seen any other urologist--</p> <p>22 A. No, he was the only one I've ever seen, and after</p> <p>23 that visit I don't know that I want to go to another</p> <p>24 one. No, I take that back. I correct myself. I</p>	<p>1 endocrinologist, who I'm waiting to have a follow-up</p> <p>2 appointment after the testing with them to see if</p> <p>3 they're going to have me go back on the testosterone</p> <p>4 again.</p> <p>5 Q. Did any physician tell you what the cause of this</p> <p>6 lower testosterone was?</p> <p>7 A. It's very common actually after men reach the age of</p> <p>8 40 for it to drop. It's just something that happens</p> <p>9 in some people. It's almost like male menopause.</p> <p>10 Q. Are you claiming that it's related to this incident</p> <p>11 in any way?</p> <p>12 A. No.</p> <p>13 Q. Is it your claim that your wife had trouble</p> <p>14 conceiving after this incident, conceiving a child?</p> <p>15 A. She did because I was unable to--I mean, I had the</p> <p>16 erectile dysfunction, and I was unable to finish, if</p> <p>17 you will. So we did not have difficulty in the past</p> <p>18 getting pregnant with two other children. Our plan</p> <p>19 was to have three children. We did not want the</p> <p>20 incident to come in the middle of that, you know, to</p> <p>21 be an obstacle for us. So we tried, but it was just</p> <p>22 not--we were not successful. So we had to go to an</p> <p>23 artificial insemination type of method or</p> <p>24 intrauterine injections that she had to get where</p>
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<p>1 did see a urologist based on--I was being treated</p> <p>2 for testosterone imbalance, and I went to see a</p> <p>3 urologist in Frederick, Maryland who referred me to</p> <p>4 an endocrinologist because of my testosterone levels</p> <p>5 being low, which Dr. Diaz had continued a treatment</p> <p>6 with me there as I had with Dr. Samaan after--during</p> <p>7 around the time of my gout, he noticed that I was</p> <p>8 having like tendonitis. So he did some testing and</p> <p>9 found that my testosterone levels were really low.</p> <p>10 So he started doing testosterone injections for me,</p> <p>11 and they were working, and it worked great. It got</p> <p>12 the testosterone back up. Well, in the meantime,</p> <p>13 when we were trying to get pregnant, the combination</p> <p>14 of the erectile dysfunction and the fact that I was</p> <p>15 taking testosterone, which had to do with the fact</p> <p>16 that I was getting older, helped lower my counts.</p> <p>17 So it was a combination of the two, and the</p> <p>18 testosterone became--I ended up going off the</p> <p>19 testosterone so it helped my counts raise. It</p> <p>20 didn't help anything else because it made the</p> <p>21 erectile dysfunction even more exaggerated, but I</p> <p>22 did go see this urologist in Maryland to check into</p> <p>23 whether or not I should go back onto a regime with</p> <p>24 the testosterone, and they referred me to an</p>	<p>1 they--you know, I had to go and give a sample that</p> <p>2 then got scrubbed, if you will, so that the active</p> <p>3 swimmers were the only part of it that we took, and</p> <p>4 we put that--took that back to her doctor's office</p> <p>5 and injected that in her, and then she got to sit</p> <p>6 for a half hour while, you know, nature took its</p> <p>7 course.</p> <p>8 Q. It's your testimony that your wife never had</p> <p>9 problems conceiving with your first two children?</p> <p>10 A. She--she did not have--it was--you know, like any</p> <p>11 other couple, we went and we tried a few times</p> <p>12 before it was successful. She had two ectopic</p> <p>13 pregnancies that were--that she miscarried. I mean,</p> <p>14 if that's a difficulty. You know, that is a</p> <p>15 difficulty as far as that goes.</p> <p>16 Q. Were there any problems like that after the incident</p> <p>17 with your wife?</p> <p>18 A. She did not have any ectopics, no.</p> <p>19 Q. Have you ever had any back problems prior to the</p> <p>20 incident?</p> <p>21 A. No back problems, no. I mean, no more than just,</p> <p>22 you know, when you're working in the yard you get</p> <p>23 sore, but no. Do you know what I mean? No</p> <p>24 injuries.</p>



<p style="text-align: right;">Page 81</p> <p>1 Q. When you'd work in the yard and get sore, would that 2 pain go into your legs or thighs? 3 A. No. 4 Q. It was just localized to your back area? 5 A. It was just your shoulders, and you know, just from 6 working with a shovel or something like that. 7 Q. Did you ever have an x-ray or MRI of your back prior 8 to 2003? 9 A. Not that I'm aware of. 10 Q. Do you think you'd be aware of it if you did have an 11 x-ray or an MRI of your back? 12 A. I can't remember if I did. 13 Q. Have you had an MRI since this incident? 14 A. On my back? 15 Q. Yes. 16 A. I believe they did an MRI on my back. 17 Q. Is that where you lay in the tube? 18 A. Yes. 19 Q. You think you'd remember doing that prior to 2003 if 20 you had done it? 21 A. Yeah. I would hope so, yeah. 22 Q. And it's your testimony here today that you don't 23 recall ever having an MRI? 24 A. I don't recall doing that, no.</p>	<p style="text-align: right;">Page 83</p> <p>1 condition was a result of this incident? 2 A. No. That's where they stated that it was just 3 degenerative disk disease is something that everyone 4 has. It's just to what degree it flares up. 5 Q. Dr. Diaz was the first physician you saw as a result 6 of this incident or as a result of your back 7 condition? 8 A. For my back, yes. 9 Q. Describe your treatment from there? What happened 10 next? 11 A. He sent me for x-rays and MRI. 12 Q. Do you know what the results of those were? 13 A. I believe that there is a printed document that 14 states what the actual technical medical statements 15 are, but the first thing he sent me for was a chest 16 x-ray just to see if there was any blunt-force 17 trauma which can happen to organs in situations 18 where you're dropped, or you've been in a jarring 19 type of accident, and those came back negative. 20 There was no blunt-force trauma. Then he did the 21 MRI on that, on the lower back where it was 22 discovered that there was in the disk, the lower 23 disk and one in the lumbar disk and the cervical 24 disk that were both injured. So the cervical disk</p>
<p style="text-align: right;">Page 82</p> <p>1 Q. Has any physician indicated to you that you had back 2 problems that you may not have known about prior to 3 this incident? 4 A. If you can clarify the statement a little bit better 5 for me? 6 Q. Has any physician examining you indicated to you 7 that you had a degenerative condition of your lower 8 spine that pre-existed this incident? 9 A. I was informed by the orthopedic specialist as well 10 as the pain management that degenerative-- 11 Q. Can you give me their names, please? 12 A. Dr. Tiso and Dr. Wulff, that degenerative disk 13 disease is common in all humans, and it just happens 14 as you get older. Everyone's disks begin to 15 degenerate to some degree. Trauma will amplify the 16 problem and exaggerate it, you know, to a greater 17 degree. 18 Q. Did they indicate that that's your situation, that 19 you had a degenerative condition in your spine prior 20 to this incident that was exacerbated or otherwise 21 made symptomatic as a result of this incident? 22 A. That was the--I believe Dr. Wulff and Dr. Tiso both 23 stated that. 24 Q. Did any physician tell you that your degenerative</p>	<p style="text-align: right;">Page 84</p> <p>1 did not generate any pain the way the lumbar disk 2 did. 3 Q. Did you ever experience neck pain as a result of 4 this incident? 5 A. No, and I believe that that was probably 6 pre-existing, that one, because I had a 7 shoulder/neck type injury when I was working back in 8 the seafood industry back, I think, like in 1989. I 9 was unloading a box off of a truck, and I was 10 pulling one of those strapping bands, and I pulled 11 on it, and it broke, and I fell back, my shoulder 12 right into a--I think it was my left shoulder. I 13 fell right into the door of the little box truck. I 14 landed into the door and kind of twisted around, and 15 my neck and shoulder were you know, out of wack for 16 a little time. 17 Q. Who was your employer at the time? 18 A. Waterfront Seafoods. 19 Q. Where were they out of? 20 A. They were in Cleveland. They actually have--they 21 sold their business and have re-opened under another 22 name. 23 Q. Do you know what the name is? 24 A. I believe it's called Catonese (phonetic) Classic</p>

22 (Pages 85 to 88)

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<p>1 Seafood.</p> <p>2 Q. Did a claim generate from that shoulder/neck injury?</p> <p>3 A. It did because I went to a chiropractic for--I</p> <p>4 believe it was maybe a month or six weeks.</p> <p>5 Q. What was the chiropractor's name?</p> <p>6 A. I don't remember. This was in Mentor, Ohio, but I</p> <p>7 went to him, and he did the stim. thing and twisted</p> <p>8 my neck and made my neck pop and did alignments, and</p> <p>9 I did that like twice, sometimes three times a week,</p> <p>10 and then I was, you know--it feels fine. So I</p> <p>11 didn't continue on with it.</p> <p>12 Q. You didn't have any other treatment as a result of</p> <p>13 that?</p> <p>14 A. No.</p> <p>15 Q. Did a lawsuit come out of that prior incident?</p> <p>16 A. No.</p> <p>17 Q. Did you get any other--was your claim approved for</p> <p>18 payment? You said you had a claim?</p> <p>19 A. Yeah, I mean, they covered it for the--as far as I</p> <p>20 know. I mean, it was a family-owned business. I</p> <p>21 went in. They took care of your insurance benefits.</p> <p>22 So I don't know how it was handled as far as that</p> <p>23 goes. I know I didn't have any out-of-pocket out of</p> <p>24 it for that treatment.</p>	<p>1 back to the same salary level. There was an award</p> <p>2 given for that.</p> <p>3 Q. What was that award?</p> <p>4 A. I believe it was, I think, \$50,000 for wages over a</p> <p>5 22 month period.</p> <p>6 Q. Was that paid? Did you receive that money?</p> <p>7 A. Yes.</p> <p>8 Q. In your answer to Interrogatory No. 5, which asks</p> <p>9 about prior injuries, you indicated that you pulled</p> <p>10 a muscle in your shoulder and your upper back while</p> <p>11 working in your yard years before the accident. Is</p> <p>12 that your recollection?</p> <p>13 A. No, it was actually while working in the seafood</p> <p>14 business prior to the accident.</p> <p>15 Q. So you never pulled a muscle in your shoulder or</p> <p>16 back working in your yard?</p> <p>17 A. I may have, but I don't remember.</p> <p>18 Q. You have no recollection of it?</p> <p>19 A. I don't. I know that it did happen definitely while</p> <p>20 I was working the seafood business.</p> <p>21 Q. And is there any reason you can recall why you</p> <p>22 didn't tell my client about the incident with the</p> <p>23 seafood company back in the '80s?</p> <p>24 A. That didn't come up in--I don't understand.</p>
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<p>1 Q. You said you had a claim as a result of this</p> <p>2 incident with your employer; correct?</p> <p>3 A. Uh-huh, yes.</p> <p>4 Q. What was that claim for?</p> <p>5 A. The workmen's comp. claim with Schwan's?</p> <p>6 Q. Yes.</p> <p>7 A. Was for the injury.</p> <p>8 Q. Let me clarify. Was it to have your medical</p> <p>9 expenses paid, or were you looking for wages?</p> <p>10 A. I just went in and--I did what they asked me to do,</p> <p>11 which was to file within our office for it. I was</p> <p>12 told to contact somebody within the office, let them</p> <p>13 know of the incident, and then when I went to my</p> <p>14 doctor, and they ask how it happened, I had to--you</p> <p>15 know, I was informed to tell him that it happened</p> <p>16 during--at work, and how it was--you know, how the</p> <p>17 whole thing happened that way so it was billed</p> <p>18 appropriately.</p> <p>19 Q. Were you ever awarded any wages as a result of this</p> <p>20 injury?</p> <p>21 A. There was a lawsuit that was--for wages that were--a</p> <p>22 difference in my wages from the time period that I</p> <p>23 did not get--you know, from the time I was let go</p> <p>24 from the company until I was able to recoup getting</p>	<p>1 Q. Did you look at the interrogatories that you</p> <p>2 answered from my client prior to signing them? Why</p> <p>3 don't I put them into evidence?</p> <p>4 A. I haven't seen the interrogatories from your client.</p> <p>5 MR. LEEDBERG: Can I have that marked as</p> <p>6 Exhibit 4?</p> <p>7 (The answers to interrogatories was marked</p> <p>8 Exhibit No. 4 for identification.)</p> <p>9 Q. You know, I'm going to drop this line of</p> <p>10 questioning. It seems to me that that incident was</p> <p>11 prior to the date that we signed,</p> <p>12 February 6, 1992. Was it prior to that date?</p> <p>13 A. Yes.</p> <p>14 Q. Okay. I'm going to drop this line of questioning.</p> <p>15 Have you ever had any other accidents, whether it be</p> <p>16 auto accidents, prior to 2003, slip and falls, any</p> <p>17 accident you can recall where you were injured?</p> <p>18 A. I had two automobile accidents. One in 1983 while</p> <p>19 living in Akron, Ohio. I was driving through an</p> <p>20 intersection. Somebody coming across, who was</p> <p>21 timing the lights, T-boned me right into my</p> <p>22 passenger door.</p> <p>23 Q. Did you suffer any injuries in that accident?</p> <p>24 A. No.</p>



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<p>1 Q. Any injury or claim come out of that accident?</p> <p>2 A. No.</p> <p>3 Q. And what was the other accident?</p> <p>4 A. The other one was I was backing up in--I had just</p> <p>5 backed out of a parking space in a Kroger parking</p> <p>6 lot in Reynoldsburg, Ohio, and a gentleman in a</p> <p>7 pickup truck just was backing up while he was</p> <p>8 talking to one of the employees who was gathering</p> <p>9 carts and backed straight into my vehicle. He never</p> <p>10 looked behind him.</p> <p>11 Q. Were you injured in that accident?</p> <p>12 A. No.</p> <p>13 Q. Any other accidents of any kind where you recall</p> <p>14 being injured that required medical care prior to</p> <p>15 2003?</p> <p>16 A. No.</p> <p>17 Q. Any since the 2003 accident?</p> <p>18 A. No.</p> <p>19 Q. You've never had treatment for any lower back</p> <p>20 related problem?</p> <p>21 A. No.</p> <p>22 Q. You mentioned earlier that you belonged to a gym</p> <p>23 prior to this accident?</p> <p>24 A. Uh-huh.</p>	<p>1 haven't been able to do as a result of it.</p> <p>2 Hobbywise, you know, my greatest joy was playing</p> <p>3 with my kids, and it's very unfortunate now that my</p> <p>4 daughter, who is the oldest, remembers me prior to</p> <p>5 my injury, now will ask me if I'm having good back</p> <p>6 day or a bad back day in wanting to play with her or</p> <p>7 do something. My four-year-old son, who is now</p> <p>8 four, who was just an infant at the time has only</p> <p>9 known me as a person with a back injury as my</p> <p>10 21 month old is the same way. He's not even old</p> <p>11 enough to understand yet, but he only will know me</p> <p>12 as a guy with a back injury. What its done is I had</p> <p>13 a lot of fun with my daughter playing on the floor,</p> <p>14 and you know, we'd go for walks and that kind of</p> <p>15 thing with regularity. Now I'm restricted to doing</p> <p>16 that on days that I feel up to it, and it's based on</p> <p>17 the pain level. I go into the pain management.</p> <p>18 They ask what your pain level is for the day, and</p> <p>19 it's very unfortunate that you go in, and there's a</p> <p>20 pain level that--I mean, there's pain everyday, but</p> <p>21 you get to a point where you tolerate it, and you</p> <p>22 just deal with it, if you will, but what you have to</p> <p>23 do is evaluate how much above that acceptable, this</p> <p>24 is what I have to live with, level that you give</p>
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<p>1 Q. And that question, I think, was in response to what</p> <p>2 were your activities prior to the incident. Any</p> <p>3 other activities such as hobbies, recreation,</p> <p>4 sports, anything you did prior to this incident in</p> <p>5 2003 that you can no longer do as a result of this</p> <p>6 incident in 2003?</p> <p>7 A. From the hobby standpoint, I would say that my yard</p> <p>8 work. I have had to--which was something I always</p> <p>9 found great pleasure in doing work in my yard. I</p> <p>10 now have to hire a lawn service, and I've had to</p> <p>11 hire people to do landscaping for me. Shovelling my</p> <p>12 driveway. I've had to hire people to do that for me</p> <p>13 while I lived in Upstate New York. Virginia, they</p> <p>14 don't really--or in Maryland, I mean, they don't</p> <p>15 really hire people to do that because it doesn't</p> <p>16 snow as often. The--you know, as far as routine</p> <p>17 painting and work around the house in that way,</p> <p>18 there's a number of projects that I have had to get</p> <p>19 someone else to do. When we moved to our new house,</p> <p>20 I had to hire a painter because I was unable to do</p> <p>21 all of that painting that needed to be done</p> <p>22 before--you know, when we were moving into it.</p> <p>23 Essentially any handywork around the house has been</p> <p>24 an item is something that I've just basically</p>	<p>1 them as a response, and I average, you know,</p> <p>2 basically an eight on the pain scale out of ten on a</p> <p>3 regular basis when I'm in there. That's just how it</p> <p>4 is. It's unfortunate, but I've had to come to</p> <p>5 accept that that's the level of pain that I'm in on</p> <p>6 a daily basis. It's--you know, I have a high</p> <p>7 tolerance for pain typically, and a great example of</p> <p>8 that is I fall asleep during root canals, and I</p> <p>9 never have problems with it, but the pain in my back</p> <p>10 has been so severe that it's debilitated me.</p> <p>11 Q. Any other recreation, sports, hobbies?</p> <p>12 A. I used to play softball. I don't do that. I used</p> <p>13 to play golf a lot. I haven't played golf since the</p> <p>14 accident.</p> <p>15 Q. Where did you play golf regularly prior to the</p> <p>16 accident?</p> <p>17 A. I played with customers. I played--as I travelled,</p> <p>18 I played in different locations, you know, for work.</p> <p>19 We'd play in different locations all over. You</p> <p>20 know, with different clients and that, we'd take</p> <p>21 them out to different places and play. So it was a</p> <p>22 regular weekend activity for me to do.</p> <p>23 Q. Any local courses that you'd go to regularly?</p> <p>24 A. I never got into any of the ones in the Syracuse</p>

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<p>1 area because by the time I got settled in up there,  2 it was--we got settled in September. It was the end  3 of the season. I didn't really have time to get  4 acclimated as I just moving into the area. So I  5 never got a chance to play up there, but I played in  6 Florida, and I played in Georgia and that type of  7 thing throughout that fall and winter with different  8 meetings that we went to. I played in Las Vegas,  9 that kind of thing, and then after the incident or  10 the accident and everything, I haven't been able to  11 do anything. In fact, I was staying near a driving  12 range, and I still--I love golf. I mean, it's one  13 of those things that I've always--I've been playing  14 since I was 11 years old, and my father-in-law and I  15 used to play, you know, as our--that was a big  16 connection for us, and it was one of those things  17 that, you know, I stopped at a driving range just to  18 kind of be in the environment and see what was going  19 on, and I ran into somebody I knew, and they're  20 like, "Hey, you want to take a couple swings?" And  21 I tried it, and I just felt miserable. I couldn't  22 even do it, and I just handed the club over, and I  23 said, "I can't do this."  24 Q. Who was this person?</p>	<p>1 definitely the pastime of choice when I had time to  2 do it. My kids were the primary, hobby, pastime,  3 and everything. Once we had children, you know, the  4 time to do other things really went away.  5 Q. Any other hobbies, sports, recreational activities?  6 A. No. There may be, but I can't think of any at this  7 point.  8 MR. LEEDBERG: Can I mark this  9 Defendant's 5, please?  10 (The letter 2-10-03 was marked  11 Exhibit No. 5 for identification.)  12 Q. I'm going to show you a document marked as  13 Defendant's 5. Do you recognize that document?  14 A. If I could have a moment to read it? Yes, I do.  15 Q. Did you create that document?  16 A. Yes.  17 Q. Is that your signature at the bottom?  18 A. Yes.  19 Q. Explain to me the remark about the stretcher being  20 faulty?  21 A. Because the legs did not come down on the stretcher.  22 To me it was the fact that the stretcher did not  23 work.  24 Q. Do you think that's what caused the incident?</p>
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<p>1 A. It was a gentleman I worked for at the time. He was  2 up in Long Island, Dave Horowitz, and I just  3 didn't--I couldn't hit the ball. I mean, I hit it,  4 but I just--I felt miserable.  5 Q. What was your typical 18-hole score prior to the  6 incident?  7 A. Anywhere from 89 to 91, in that range.  8 Q. Did you say you played softball?  9 A. Yes.  10 Q. Did you play for a league?  11 A. I played in leagues until my wife and I moved to  12 Columbus, and then I was travelling too much so I  13 couldn't play. Our weekends got--we met in  14 Cleveland. I played in Cleveland, and I played  15 shortstop.  16 Q. What year was that?  17 A. I played up until--I played through '93.  18 Q. Prior to the incident you hadn't played softball for  19 a league for ten years?  20 A. No, I didn't have a chance to. I was working too  21 much, travelling too much.  22 Q. Would you call softball one of your pastimes at the  23 time of this incident?  24 A. Not at the time of the incident. Golf was my--was</p>	<p>1 A. I think if the legs had come down, they wouldn't  2 have dropped me.  3 Q. Did you suffer from hypertension prior to this  4 incident?  5 A. My blood pressure had recently started to elevate,  6 yes.  7 Q. Has there been any change in the status of your  8 blood pressure since this incident that you  9 attribute to this incident?  10 A. My blood pressure continued to elevate, and rather  11 than being on one medication, I was--I went to a  12 cardiologist where I was switched to two medications  13 to balance it out, and I currently have my blood  14 pressure under control.  15 Q. How long did it take you to get your blood pressure  16 under control?  17 A. Just under a year.  18 Q. Do you think that any blood pressure related  19 condition was caused by this incident?  20 A. My primary care physician and the pain management  21 doctor, Dr. Tiso and Dr. Diaz both made comments to  22 the fact that when you're in pain, your blood  23 pressure elevates, which was the result of why at  24 the time of the incident my blood pressure was as</p>



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<p>1 elevated as it was directly a result of the pain</p> <p>2 that I was in, and it noted on the</p> <p>3 Defendant Item No. 1 in the upper right corner there</p> <p>4 the blood pressure at 194 over 106. It indicates a</p> <p>5 high blood pressure right there at that point, and</p> <p>6 even the paramedics had listed 160 over 120 at the</p> <p>7 time that they had me in the back of the ambulance.</p> <p>8 So that was directly related to the pain that I was</p> <p>9 in at that point.</p> <p>10 Q. Who's Dr. Cameron Huckle?</p> <p>11 A. If I remember correctly, he is a doctor that was</p> <p>12 doing an experimental procedure for disk replacement</p> <p>13 surgery, and my name was given to him--actually I</p> <p>14 don't know how my name was given to him, but I was</p> <p>15 contacted by him to see if I was interested in</p> <p>16 participating in a disk replacement surgery, and I</p> <p>17 would be actually as a live guinea pig, if you will.</p> <p>18 I went through and was examined by him and talk to</p> <p>19 him and such, and after listening to what they had</p> <p>20 to say as far as--I looked at the whole scenario and</p> <p>21 said, "I need to seek advice from--you know, I need</p> <p>22 to talk to some other doctors to see if this is the</p> <p>23 right course of action for me," and I just didn't</p> <p>24 feel right about going with something that, No. 1,</p>	<p>1 endocrinologist because she didn't know how to read</p> <p>2 it. So they advised me to go immediately to see the</p> <p>3 neurosurgeon. I went in. We were talking, and I</p> <p>4 told him about some of the treatment methods that</p> <p>5 have been discovered--it was a non-related</p> <p>6 conversation, if you will. They went in and</p> <p>7 discovered this was nothing to be concerned about.</p> <p>8 I said, "While I've got you here, can I ask you a</p> <p>9 question," and I explained the treatments that I'd</p> <p>10 been going through and that, and he basically told</p> <p>11 me his advice and not knowing my history and not--he</p> <p>12 says, "But just in my casual advice, your best</p> <p>13 option is to not have surgery." He says, "My advice</p> <p>14 to you is to try to slowly--over time you're going</p> <p>15 to have to wean yourself off the pain medication and</p> <p>16 find other ways to manage the pain," in which I</p> <p>17 said, "What does that mean?" He said, "Well, we'll</p> <p>18 have to set an appointment and talk about that</p> <p>19 further." He says, "I really think that surgery is</p> <p>20 not the answer. Once you start cutting into</p> <p>21 somebody's back, it presents a problem that becomes</p> <p>22 a long-time problem."</p> <p>23 Q. Did you ever actually see Dr. Huckle?</p> <p>24 A. Yes.</p>
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<p>1 at the time wasn't FDA approved. No. 2, was still</p> <p>2 in experimental phase, and it just was too risky to</p> <p>3 me.</p> <p>4 Q. So have you since decided not to go forward with</p> <p>5 this disk replacement surgery?</p> <p>6 A. Yes, I've decided not to. You're correct.</p> <p>7 Q. Have you discussed any other treatment options with</p> <p>8 any of your physicians?</p> <p>9 A. Most recently I spoke with a neurosurgeon.</p> <p>10 Q. What was that neurosurgeon's name?</p> <p>11 A. His name is--let me think of it here. It's</p> <p>12 Dr. Nathan Swami, S-w-a-m-i, and he's in Maryland.</p> <p>13 When I went to get my MRI--I had an MRI done on my</p> <p>14 head for my testosterone. It seems unusual, but the</p> <p>15 testosterone at times is directly related to</p> <p>16 sometimes the tumors on the pituitary gland, and the</p> <p>17 only way they can find that out is to do an MRI. At</p> <p>18 the time of that, they discovered that maybe it</p> <p>19 happened when I was a baby, but--I might have been</p> <p>20 dropped on my head as a baby or something. I had</p> <p>21 like an indentation or something in the--where there</p> <p>22 was spinal fluid on the front corner, just a little</p> <p>23 corner in my brain. It doesn't affect anything, but</p> <p>24 it showed up on the MRI, and it alarmed the</p>	<p>1 Q. You did?</p> <p>2 A. I spent four hours in his office one afternoon.</p> <p>3 MR. LEEDBERG: For the record, I don't</p> <p>4 think we have his report.</p> <p>5 A. It was a--like I said, I got contact--I don't even</p> <p>6 know who contacted me, and it was in</p> <p>7 Buffalo, New York that I had to go there for the</p> <p>8 appointment. I don't know that an actual report was</p> <p>9 ever generated. He was talking to me kind of as</p> <p>10 a--it was a discussion to see if I was interested in</p> <p>11 participating in a--in this study. It was not</p> <p>12 something that workmen's comp. would endorse either,</p> <p>13 and they did not feel strongly about it either. So</p> <p>14 I didn't have any comfort going through with it, but</p> <p>15 I know that the reports are available if you need</p> <p>16 them.</p> <p>17 Q. So your present plan is to stay the course of</p> <p>18 treatment you're currently receiving?</p> <p>19 A. At this point to try to manage things as best I can.</p> <p>20 You know, that's where I'm at at this point until I</p> <p>21 can get to another doctor--until I get back to</p> <p>22 Dr. Swami and discuss with him further options that</p> <p>23 he wasn't at liberty to talk about the day we were</p> <p>24 there because he didn't have my records in front of</p>

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<p>1 me to look at my history.</p> <p>2 Q. The truck that you rented and drove back to</p> <p>3 Connecticut in, was that an automatic or standard?</p> <p>4 A. Automatic.</p> <p>5 Q. You mentioned that you were terminated from your</p> <p>6 employment in your view because they didn't want you</p> <p>7 to have a worker's compensation case; is that</p> <p>8 correct?</p> <p>9 A. Yes.</p> <p>10 Q. Could you explain that to me?</p> <p>11 A. My former direct supervisor, Pat McCoy, never once</p> <p>12 acknowledged my injury at all. Never said, "How are</p> <p>13 you feeling?" Never said, "Wow, what happened?"</p> <p>14 Never said anything regarding the injury. In fact,</p> <p>15 I had to fly--about three or four weeks after the</p> <p>16 accident I had to fly to Florida for a national</p> <p>17 sales meeting and awards presentation that the</p> <p>18 entire company was going to, and I was in a back</p> <p>19 brace, and I was heavily medicated and falling</p> <p>20 asleep in meetings in front of people, walking bent</p> <p>21 over most the time, you know, like I said in a</p> <p>22 brace, very uncomfortable, and he never once made a</p> <p>23 comment at all about, you know, "Hey, what's wrong?</p> <p>24 Hey, how you feeling or anything?" Nothing. No</p>	<p>1 it was very suspect as to why it happened.</p> <p>2 Q. Do you think them terminating your employment would</p> <p>3 compromise your ability to bring a worker's</p> <p>4 compensation claim?</p> <p>5 MR. DURSO: I'm sorry, could you say that</p> <p>6 again?</p> <p>7 Q. Do you think that them terminating your employment</p> <p>8 would compromise your ability to bring a worker's</p> <p>9 compensation claim? Your testimony earlier today</p> <p>10 was that they terminated you because they did not</p> <p>11 want you to have a worker's compensation case.</p> <p>12 A. My impression was is that they--by the fact that I</p> <p>13 got a workmen's comp. case--there was a workmen's</p> <p>14 compensation case, and it was going to raise their</p> <p>15 insurance rates on workmen's compensation, that that</p> <p>16 did not go over well with them. They were angry</p> <p>17 about that.</p> <p>18 Q. And you think that these other reasons they gave for</p> <p>19 terminating your employ were a front because they</p> <p>20 were displeased with your worker's compensation</p> <p>21 claim?</p> <p>22 A. Yes, and when I was awarded the back wages, you</p> <p>23 know, it was based on that same thing, that there</p> <p>24 was not just cause for termination.</p>
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<p>1 management personnel acknowledged it. Every other</p> <p>2 person at the event came up and talked to me about</p> <p>3 it. None of the management personnel ever</p> <p>4 acknowledged it at all, and then all of a sudden out</p> <p>5 of the blue after it was--between that and my</p> <p>6 challenging the fact that they changed the policy on</p> <p>7 bonuses and it affected one of my employees, and I</p> <p>8 challenged that to my boss's boss, and asked the HR</p> <p>9 department how to handle it, they weren't pleased</p> <p>10 with me getting involved at that level and started</p> <p>11 to really give me a lot of grief. So they</p> <p>12 said--they made up this thing about me</p> <p>13 inappropriately using a company credit card, which</p> <p>14 was I had a direct billing on the card for my cell</p> <p>15 phone, and they came out with a policy in January,</p> <p>16 and I had already had a direct billing for my cell</p> <p>17 phone. They came out with a policy in January that</p> <p>18 no more could you charge your cell phone to that.</p> <p>19 Well, I had contacted the cell phone company to do</p> <p>20 that, but there were two charges that came through</p> <p>21 on the card anyhow, and they said that was</p> <p>22 inappropriate because I had already been given the</p> <p>23 notice, and then two things came through, and that</p> <p>24 was their reasoning. So to me in my interpretation,</p>	<p>1 MR. LEEDBERG: I'm going to look over my</p> <p>2 notes. Do you have any questions?</p> <p>3 MR. CETKOVIC: Nope.</p> <p>4 MR. LEEDBERG: I'm going to look over my</p> <p>5 notes.</p> <p>6 (Brief break.)</p> <p>7 (The Syracuse Orthopedic records were</p> <p>8 marked Exhibit No. 6 for identification.)</p> <p>9 Q. (Mr. Leedberg) Mr. Koran, I'm going to ask you a</p> <p>10 couple questions on Defendant's 6, which I'll</p> <p>11 represent to you are the documents that we got back</p> <p>12 from Warren Wulff as a result of a request for</p> <p>13 medical records from him, and I want to refer you</p> <p>14 specifically to the second page under--it says,</p> <p>15 "Review of Systems 4" and it says, "Review of</p> <p>16 Systems." Do you see that paragraph a couple down?</p> <p>17 A. Uh-huh.</p> <p>18 Q. If you could read that, read that last sentence in</p> <p>19 that?</p> <p>20 MR. DURSO: Of which one?</p> <p>21 MR. LEEDBERG: "Review of Systems," I'm</p> <p>22 sorry.</p> <p>23 MR. DURSO: "Review of Systems 4" or--</p> <p>24 MR. LEEDBERG: No, the one without the</p>



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<p>1 four.</p> <p>2 A. "Patient denies dysuria, hematuria, nocturia,</p> <p>3 frequency, and sexual dysfunction."</p> <p>4 Q. Do you recall denying sexual dysfunction on that</p> <p>5 date, which seems to be September 7, 2004?</p> <p>6 A. No.</p> <p>7 Q. And I presume later in record he says it again--it</p> <p>8 was actually an earlier visit on July 17, 2003, and</p> <p>9 it would be your testimony here today that that's</p> <p>10 not accurate?</p> <p>11 A. No, because I was taking--you know, if I needed to,</p> <p>12 I was doing the Cialis. So that was--I mean, it</p> <p>13 might have been interpreted that it wasn't</p> <p>14 dysfunctional because I was taking the Cialis to fix</p> <p>15 it. That would be my interpretation.</p> <p>16 Q. Do you recall having discussions in particular about</p> <p>17 sexual dysfunction?</p> <p>18 A. No, not at all.</p> <p>19 Q. Where do you fill your prescriptions now that you're</p> <p>20 down in Maryland?</p> <p>21 A. We go to a CVS, and then there are some mail order</p> <p>22 prescriptions, but the pain management ones I do all</p> <p>23 through a place called Medicine Plus, which is a</p> <p>24 small pharmacy that I have everything done through</p>	<p>1 some medical records, some of which we were aware</p> <p>2 of, some of which we were not, in particularly the</p> <p>3 records for Diaz pre-loss, and there was some</p> <p>4 mention of a Dr. Huckle, some physicians down in</p> <p>5 Maryland that we have no records from. So just for</p> <p>6 those reasons, I'm going to state for the record</p> <p>7 that I think we should reserve our rights to</p> <p>8 reconvene at a later date if those records raise any</p> <p>9 issues with regards to the claim.</p> <p>10 MR. DURSO: Just so I'm clear, you have</p> <p>11 some Diaz records.</p> <p>12 MR. LEEDBERG: I have the records from</p> <p>13 Diaz February 10th, your first visit forward, and</p> <p>14 there were at least seven or eight visits to that</p> <p>15 office previously, which I understand from</p> <p>16 conversation yesterday, Dr. Dispensa (phonetic) took</p> <p>17 Mr. Koran's chart after the business dissolved.</p> <p>18 That was his partner. I think Dr. Dispensa</p> <p>19 (phonetic), but that's what they say at this point,</p> <p>20 but we'll see if that pans out.</p> <p>21 MR. DURSO: Okay.</p> <p>22 (Deposition suspended at 1:49 p.m.)</p> <p>23</p> <p>24</p>
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<p>1 that pharmacy because the way the State of Maryland</p> <p>2 is structured, if you're on a controlled substance,</p> <p>3 you have to declare a single pharmacy. So I had to</p> <p>4 call around and find a pharmacy that would have the</p> <p>5 medications that I was looking for when I needed to</p> <p>6 fill the prescriptions. So this small pharmacy</p> <p>7 called Medicine Plus, which is like an old fashioned</p> <p>8 pharmacy actually has the items that I need, and as</p> <p>9 a result of that--</p> <p>10 Q. Do you know where they're based out of?</p> <p>11 A. They're in Newmarket. They're actually right in</p> <p>12 Newmarket.</p> <p>13 Q. You were saying as a result?</p> <p>14 A. As a result of that, I utilized them for all of my</p> <p>15 pain management medication. I do mail order for my</p> <p>16 other maintenance prescriptions that I'm able to do,</p> <p>17 but controlled substances have to be done, you know,</p> <p>18 on a monthly basis.</p> <p>19 Q. Do they call that the Rush Limbaugh Act?</p> <p>20 A. I have no idea.</p> <p>21 Q. The CVS, where is that located?</p> <p>22 A. That's in Frederick.</p> <p>23 MR. LEEDBERG: Okay. I'm just going to</p> <p>24 state for the record that it appears we're missing</p>	<p>1 CERTIFICATE</p> <p>2</p> <p>3 I, the undersigned, JOSEPH KORAN, do hereby</p> <p>4 certify that I have read the foregoing deposition,</p> <p>5 taken on 21st, July, 2006, and that to the best of</p> <p>6 my knowledge, said deposition is true and accurate</p> <p>7 (with the exception of the following corrections</p> <p>8 listed below):</p> <p>9 Page Line Correction</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18 Signed: _____</p> <p>19</p> <p>20</p> <p>21 Date: _____</p> <p>22</p> <p>23</p> <p>24</p>

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COMMONWEALTH OF MASSACHUSETTS

I, Leslie D'Emilia, a Court Reporter and Notary Public in and for the Commonwealth of Massachusetts, do hereby certify that the foregoing deposition was taken before me on the 21st day of July, 2006;

That the witness named in the deposition, prior to being examined, was by me first duly sworn;

That said deposition was taken before me at the time and place herein set forth, and was taken down by me in shorthand and thereafter transcribed into typewriting under my direction and supervision;

That said deposition is a true record of the testimony given by the witness and of all objections made at the time of examination.

I further certify that I am neither counsel for nor related to any party to said action, nor in any way interested in the outcome thereof.

IN WITNESS WHEREOF I have subscribed my name and affixed my seal of this 21st day of July, 2006.

\_\_\_\_\_  
Leslie D'Emilia  
Notary Public  
Massachusetts  
My Commission Expires:  
March 13, 2009



**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 2**  
**EMT Dominick Tolson's Deposition**

Dominick Clark Tolson

09/19/2006

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Volume: I  
Pages: 1-60  
Exhibits: None

UNITED STATES DISTRICT COURT

DISTRICT OF MASSACHUSETTS

NO. 05-11454 RGS

- - - - - x  
Joseph H. Koran, and Kimberly Koran, individually  
and on behalf of Ana Koran, Joseph Koran, Jr., and  
Erik Koran, minors,,

Plaintiffs,

v.

Elizabeth Weaver and Town of Sherborn,

Defendants.  
- - - - - x

DEPOSITION OF DOMINICK CLARK TOLSON

Tuesday, September 19, 2006

1:15 p.m.

SHERBORN Fire Department

22 North Main Street

Sherborn, Massachusetts

Reporter: Lori-Ann London, RPR

Dominick Clark Tolson

09/19/2006

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<p>1 APPEARANCES:</p> <p>2</p> <p>3 By Carmen L. Durso, Esquire and</p> <p>4 Matthew P. Coletti, Esquire</p> <p>5 LAW OFFICE OF CARMEN L. DURSO</p> <p>6 175 Federal Street</p> <p>7 Boston, Massachusetts 02110</p> <p>8 617.728.9123</p> <p>9 Appearing for the Plaintiffs</p> <p>10</p> <p>11 By Michael D. Leedberg, Esquire</p> <p>12 PIERCE, DAVIS &amp; PERRITANO, LLP</p> <p>13 Ten Winthrop Square</p> <p>14 Boston, Massachusetts 02110-1257</p> <p>15 617.350.0950</p> <p>16 Appearing for the Defendants</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p>1 PROCEEDINGS</p> <p>2</p> <p>3 DOMINICK CLARK TOLSON,</p> <p>4 a witness called for examination by the</p> <p>5 Plaintiffs, having been satisfactorily identified</p> <p>6 by the production of his Massachusetts driver's</p> <p>7 license, and duly sworn by the Notary Public, was</p> <p>8 examined and testified as follows:</p> <p>9 EXAMINATION</p> <p>10 BY MR. DURSO:</p> <p>11 Q State your name for the record, please.</p> <p>12 A Dominick Clark Tolson.</p> <p>13 Q What is your current address, please?</p> <p>14 A 38 Whitney Street, Sherborn.</p> <p>15 Q And what's your date of birth?</p> <p>16 A 8/13/57.</p> <p>17 Q This is a deposition, what we're doing</p> <p>18 here today.</p> <p>19 A Um-hm.</p> <p>20 Q Have you ever done this before?</p> <p>21 A Yes.</p> <p>22 Q Okay. Under what circumstances?</p> <p>23 A Land dispute.</p> <p>24 Q Okay. I want to ask you briefly about</p>
Page 3	Page 5
<p>1 INDEX</p> <p>2</p> <p>3 DEPOSITION OF: PAGE</p> <p>4 DOMINICK CLARK TOLSON</p> <p>5</p> <p>6 EXAMINATION BY MR. DURSO 4</p> <p>7</p> <p>8 _____ X</p> <p>9 EXHIBITS</p> <p>10 NO. PAGE</p> <p>11</p> <p>12</p> <p>13 No Exhibits Marked</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p>1 your education and training.</p> <p>2 A Okay.</p> <p>3 Q Are you a high school graduate?</p> <p>4 A Yes.</p> <p>5 Q What year and what high school?</p> <p>6 A Natick High School, 1976.</p> <p>7 Q And after Natick High School, would you</p> <p>8 tell me about your further education and training?</p> <p>9 A Geez, that was a while ago. About a</p> <p>10 year -- or two semesters at San Diego State.</p> <p>11 Q Yeah.</p> <p>12 A Two semesters at Framingham State.</p> <p>13 Q Yeah.</p> <p>14 A A semester at Quinsigamond.</p> <p>15 Q Yeah.</p> <p>16 A And 21 years in the United States Navy.</p> <p>17 Q Honorable discharge?</p> <p>18 A Yes.</p> <p>19 Q And what was your -- what was your</p> <p>20 rating on --</p> <p>21 A Chief petty officer.</p> <p>22 Q Besides the obvious stuff, what did you</p> <p>23 do in the Navy?</p> <p>24 A I was a hull maintenance technician.</p>

2 (Pages 2 to 5)

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Page 6	Page 8
<p>1 Q Did you do anything medically related in 2 the Navy? 3 A I did eight years with the special 4 warfare, which would be some combat first aid. 5 Q Okay. At some point did you get some 6 certifications from the state of Massachusetts? 7 A Yes. 8 Q Tell me about those. 9 A I am a certified EMT. 10 Q When did you get that? 11 A Wow. Geez, it's five years ago. 12 Q So about 2001? 13 A Yeah, yeah, because my current -- my 14 current expiration is April 2007. 15 Q Okay. So would it have been five years 16 before that? 17 A Four years before that, because you 18 recertify every two years. So it's my current 19 expiration. 20 Q So April 2003? 21 A That's correct. 22 Q All right. We're going to talk about 23 something today that happened in February of 2003. 24 Were you certified at that time?</p>	<p>1 A I was in the Navy from September 1976 2 until August 1998. 1998? I can tell you. 3 (Pause.) 4 A '97 would make it 21 years. 5 Q Okay. And then was the fire fighter 6 position with the town of Sherborn the first thing 7 you did when you got out of the Navy? 8 A No. 9 Q What did you do before that? 10 A I worked for an engineering company, 11 Framingham Welding and Engineering, as a 12 production planner. 13 Q How long did you work for them? 14 A Eight years while I was doing time in 15 the reserves, and from there, I went to the 16 Double E Company in West Bridgewater, and I'm a 17 regional sales manager. 18 Q Okay. And for how long have you -- are 19 you still with Double E? 20 A Yes. 21 Q Yeah. Okay. 22 So you've been a fire fighter since 23 1998. Are you a volunteer or -- 24 A Yes. Volunteer, yes.</p>
Page 7	Page 9
<p>1 A Yes, I was. Yes, I was. 2 Q Okay. So -- 3 A I'm sorry, it was before that. 4 Q Yeah. 5 A It was before that. 6 Q So did you have another -- 7 A In fact, it's been longer than that. 8 Q Did you have a four-year term before 9 that or -- 10 A No, it goes in two-year cycles. So I 11 guess it's been longer than that. 12 Q So sometime before February 2003 you got 13 your initial certification? 14 A Yes, and I can get the exact dates, we 15 have it on record. 16 Q Okay. What is your position with the 17 town of Sherborn? 18 A I am a -- currently a fire fighter on 19 Engine 1. 20 Q And when did you start as a fire 21 fighter? 22 A '98, 1998. 23 Q Okay. Before -- what years were you in 24 the Navy?</p>	<p>1 Q Okay. So when did you -- so while you 2 were doing these other things you just told me 3 about, you also have been a volunteer fire fighter 4 in Sherborn? 5 A That's correct. 6 Q And when you say you're a fire fighter 7 on -- what did you say, Engine 1? 8 A Engine 1, yes. 9 Q Engine 1. Is that in addition to being 10 an EMT? 11 A That's correct. 12 Q Okay. So you -- you get -- you get 13 called out both for regular fire fighting duties 14 and as an EMT? 15 A I'm no longer on the ambulance at this 16 time. 17 Q Oh, okay. Were you a regular fire 18 fighter continuously from '98 to the present and 19 -- or did you switch back and forth from being a 20 fire fighter and on the ambulance? 21 A I was continuous until now, till 22 present. 23 Q Okay. And for how long a period of time 24 were you on the ambulance?</p>

3 (Pages 6 to 9)



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Page 10	Page 12
<p>1 A Up until about two years ago.</p> <p>2 Q Okay. But you've maintained your</p> <p>3 certification as an EMT in the meantime, right?</p> <p>4 A That's correct.</p> <p>5 Q So how come you're not on the ambulance</p> <p>6 anymore?</p> <p>7 A It's kind of a conflict with work.</p> <p>8 Q Okay.</p> <p>9 A As you can see, I do a lot of things.</p> <p>10 Q Yes. I don't know how you do it all, to</p> <p>11 be honest with you, but it must be that Navy</p> <p>12 training.</p> <p>13 A Yeah. Absolutely.</p> <p>14 MR. LEEDBERG: I'm still trying to</p> <p>15 get over the fact that he's 49 years old. I would</p> <p>16 have guessed you're about 35.</p> <p>17 (Off record.)</p> <p>18 Q I'm going to show you a document that</p> <p>19 was marked as Exhibit 1 in the Christensen</p> <p>20 deposition. Would you take a look at it for me,</p> <p>21 please?</p> <p>22 A Sure.</p> <p>23 (Document exhibited to witness.)</p> <p>24 (Witness perusing document.)</p>	<p>1 run over by a car. Patient's first complaint of</p> <p>2 pressure on the first joint of the big toe, tender</p> <p>3 to the touch. Transported to MetroWest Natick.</p> <p>4 Q Okay. And the other information, the</p> <p>5 things -- the boxes that are checked and the --</p> <p>6 the -- the patient information, and the dispatch</p> <p>7 times, were those written -- all written by you?</p> <p>8 A Yes, this was. Yes, it was.</p> <p>9 Q And how about the vital signs, did you</p> <p>10 enter those in there?</p> <p>11 A Yes, I took the vitals.</p> <p>12 Q Okay. Do you have a memory of this</p> <p>13 particular incident from February 6, 2003.</p> <p>14 A I have -- I remember some of this.</p> <p>15 Q Okay.</p> <p>16 A Some of what happened, yes.</p> <p>17 Q What I'd like you to tell me, if you</p> <p>18 would, is what you can recall about what happened</p> <p>19 at that time. Starting with you're at the -- you</p> <p>20 were at the station here that evening?</p> <p>21 A Yes, yes, I was.</p> <p>22 Q Would you start with that and tell me</p> <p>23 what you can recall happened?</p> <p>24 MR. LEEDBERG: I'm just going to</p>
Page 11	Page 13
<p>1 Q Did you get a chance to look at that</p> <p>2 document?</p> <p>3 A Yes, I did.</p> <p>4 Q Okay. Would you tell me whether or not</p> <p>5 the handwriting on that document is your</p> <p>6 handwriting?</p> <p>7 A Yes, it is, up until this point.</p> <p>8 (Indicating.)</p> <p>9 Q Up until which point?</p> <p>10 A Up until this last statement that</p> <p>11 says --</p> <p>12 Q Addendum?</p> <p>13 A -- Natick. It says MetroWest Natick.</p> <p>14 Q Okay. Where it says "addendum," that's</p> <p>15 not your writing?</p> <p>16 A That's not my writing.</p> <p>17 Q Okay. Do you know whose writing that</p> <p>18 is?</p> <p>19 A No, I don't. This might be Scott's. I</p> <p>20 don't know. I don't know.</p> <p>21 Q Okay. All right. Would you do me a</p> <p>22 favor and read where it says "comments," just read</p> <p>23 me the writing there, please, the part you wrote?</p> <p>24 A "Patient had left foot and first big toe</p>	<p>1 object as to form, but go ahead and answer.</p> <p>2 A The tone went off.</p> <p>3 Q The -- I'm sorry, the what?</p> <p>4 A The tone went off calling out the</p> <p>5 ambulance.</p> <p>6 Q Okay.</p> <p>7 A We -- Scott and I left. We were up in</p> <p>8 the meeting room, went down, got in the ambulance</p> <p>9 and went to the call site, which was the Sherborn</p> <p>10 Inn. At that --</p> <p>11 Q Can I stop you there?</p> <p>12 A Sure.</p> <p>13 Q Was it just the two of you who went?</p> <p>14 A I don't remember. I know it was --</p> <p>15 Q Let me ask you specifically --</p> <p>16 A The two of us were in the front of the</p> <p>17 ambulance, I know that.</p> <p>18 Q Do you recall whether or not Deputy</p> <p>19 Chief Buckler went with you?</p> <p>20 A I'm not sure if he rode in the ambulance</p> <p>21 or if he walked over. It's only a short walk.</p> <p>22 Q Did he go to the scene too, though?</p> <p>23 A He was at the scene, yes.</p> <p>24 Q Okay. All right. So you and Scott went</p>

4 (Pages 10 to 13)

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<p>1 in the ambulance to the scene. And where was the 2 scene?</p> <p>3 A In the parking lot of the Sherborn Inn.</p> <p>4 Q Okay. And did you know going over there 5 what the call was for?</p> <p>6 A I don't remember exactly how the call 7 came in.</p> <p>8 Q Okay. When you got there, what did you 9 find?</p> <p>10 A We found a man that was walking around, 11 and we proceeded to ask him what had happened, 12 there was also a couple of officers there.</p> <p>13 Q Okay. You say "we," did you speak with 14 him yourself?</p> <p>15 A Yes, I did.</p> <p>16 Q Yeah. And tell me about that, tell me 17 about your conversation with him, if you will.</p> <p>18 A I don't remember my exact words. My 19 best memory would be I asked him what his chief 20 complaint was and asked the officers what had 21 happened trying to evaluate the scene.</p> <p>22 Q And do you recall what you learned?</p> <p>23 A Yes.</p> <p>24 Q What was that?</p>	<p>1 somewhat with -- with Ron. He didn't pay a whole 2 lot of attention to Scott and I at that time.</p> <p>3 Q Okay. Did you hear any of that 4 conversation?</p> <p>5 A No, I don't remember exactly what was 6 said.</p> <p>7 Q Okay. When you started talking to him, 8 can you remember anything that you said to him and 9 he said to you?</p> <p>10 A My -- my conversation with him was I 11 basically asked him where his pain was.</p> <p>12 Q Okay. And what did he say, if you 13 remember?</p> <p>14 A I don't -- I don't remember exactly what 15 -- what his reply was.</p> <p>16 Q Okay. Do you remember whether or not 17 his complaint seemed to be consistent with what he 18 said happened, being run over by a car, his foot 19 being run over by a car?</p> <p>20 A Yes, I would say so, yes.</p> <p>21 Q Okay. What -- what did you observe -- 22 well, tell me the mechanical things you did in 23 order to treat him if you would. You told me you 24 got him to sit down on the -- what did you say,</p>
Page 15	Page 17
<p>1 A We learned that his foot had been run 2 over by a car.</p> <p>3 Q Okay. And did you render treatment to 4 him yourself personally?</p> <p>5 A Yes, I did.</p> <p>6 Q Okay. Tell me what you did, if you 7 would.</p> <p>8 A First we persuaded the patient to sit 9 down in the back -- on the back step of the 10 ambulance.</p> <p>11 Q Okay.</p> <p>12 A We asked him if we could remove his shoe 13 so we could examine his foot. With some 14 resistance, he did let us -- finally let us do 15 that.</p> <p>16 Q When you say some resistance, what do 17 you mean?</p> <p>18 A He wasn't -- at that point he wasn't 19 really receptive to our treatment.</p> <p>20 Q Okay. And why was that, if you know?</p> <p>21 A Well, he was -- he was not happy about 22 the whole situation, and he was -- he was quite 23 upset. From what I remember, he was -- he was 24 arguing with the police officers and talking</p>	<p>1 the back step of the --</p> <p>2 A Yes.</p> <p>3 Q -- of the ambulance?</p> <p>4 And what is that, like the bumper, 5 or is there something else there?</p> <p>6 A Yeah, like the back bumper of the 7 ambulance.</p> <p>8 Q Okay. And so you got him to sit down, 9 and what happened next; what's the next thing that 10 occurs?</p> <p>11 A We got him to remove his shoe --</p> <p>12 Q Yeah.</p> <p>13 A -- and his sock and we proceeded -- I 14 proceeded to -- to palpitate his foot for 15 tenderness and look for any signs of distortion, 16 broken bones, swelling, bruising, those types of 17 things.</p> <p>18 Q Okay. Do you remember what you found?</p> <p>19 A Found slight swelling, to my best 20 knowledge. I don't recall if it was bruised or -- 21 I don't recall.</p> <p>22 Q Okay. What happened next?</p> <p>23 A We recommended that we transport, that 24 we take him to the hospital, and that he get it</p>

5 (Pages 14 to 17)

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<p>1 examined and X rayed.</p> <p>2 Q Okay. Why was that?</p> <p>3 A It's a trauma injury. It should be --</p> <p>4 should be seen by a physician.</p> <p>5 Q Okay. Did he agree to do that?</p> <p>6 A Initially, no.</p> <p>7 Q And did -- did that change?</p> <p>8 A Yes.</p> <p>9 Q And how did it change -- did you have</p> <p>10 further conversation with him about that?</p> <p>11 A Yes.</p> <p>12 Q And tell me about that conversation.</p> <p>13 A We advised him that it was better to</p> <p>14 have it seen and treated now than to wait and have</p> <p>15 something develop later.</p> <p>16 Q Okay. So did he ultimately agree that</p> <p>17 he would be -- he would go to the hospital?</p> <p>18 A Yes.</p> <p>19 Q Okay. What did you do in terms of</p> <p>20 transporting him to the hospital; what are the</p> <p>21 steps that you took to transport him?</p> <p>22 MR. LEEDBERG: Object as to form,</p> <p>23 but go ahead and answer if you understand the</p> <p>24 question.</p>	<p>1 the usual treatment that you would apply in that</p> <p>2 situation?</p> <p>3 A A suspected break, you would splint.</p> <p>4 Q Okay. And do you have any recollection</p> <p>5 as to whether or not you did that?</p> <p>6 A I don't remember if we splinted or not.</p> <p>7 I don't recall.</p> <p>8 Q You said -- I think you said, and if I'm</p> <p>9 wrong, you correct me, I think you said you may</p> <p>10 have observed some swelling?</p> <p>11 A Yes.</p> <p>12 Q Okay. And what would the usual</p> <p>13 procedure -- the usual treatment be for observing</p> <p>14 swelling?</p> <p>15 A That would be a -- break a cold pack,</p> <p>16 put a cold pack on, transport.</p> <p>17 Q Okay. And, again, do you have any</p> <p>18 recollection as to whether or not you did that?</p> <p>19 A I believe we did that. I don't recall</p> <p>20 whether we did it prior to transport or during</p> <p>21 transport.</p> <p>22 Q Okay. How many of you were there in the</p> <p>23 ambulance when you transported him?</p> <p>24 A I was there myself, just myself.</p>
Page 19	Page 21
<p>1 THE WITNESS: I under the -- I think</p> <p>2 I understand the question.</p> <p>3 A Are you -- do you mean procedurally what</p> <p>4 did we do or....</p> <p>5 Q Well, the last thing I've got is he's</p> <p>6 sitting on the back step, you're examining his</p> <p>7 foot. What do you do after that in terms of</p> <p>8 taking him to the hospital; what other steps do</p> <p>9 you take?</p> <p>10 A We got him on the stretcher --</p> <p>11 Q Okay.</p> <p>12 A -- got him strapped down.</p> <p>13 Q Yeah.</p> <p>14 A And then left the scene and headed for</p> <p>15 the hospital.</p> <p>16 Q Okay. Did you -- aside from examining</p> <p>17 his foot, did you provide any treatment on the</p> <p>18 scene?</p> <p>19 A I don't remember.</p> <p>20 Q Do you remember whether you wrapped his</p> <p>21 foot or whether you did anything to his foot?</p> <p>22 A I don't remember.</p> <p>23 Q Given the type of injury that he</p> <p>24 complained of, what would be the usual procedure,</p>	<p>1 Q Okay. And --</p> <p>2 A Scott drove.</p> <p>3 Q Scott drove. And you were in the back?</p> <p>4 A Yes.</p> <p>5 Q Okay. So this is something you may have</p> <p>6 done while on route; is that what you're saying?</p> <p>7 A That's correct.</p> <p>8 Q Okay. And what can you tell me about</p> <p>9 Mr. Koran's position in the vehicle at that time?</p> <p>10 I think you said he was on the stretcher; is that</p> <p>11 right?</p> <p>12 A That is correct, he was on the</p> <p>13 stretcher.</p> <p>14 Q Okay. And what was the position of the</p> <p>15 stretcher, was he -- was he prone on the</p> <p>16 stretcher?</p> <p>17 A Yes. The stretcher was in the prone</p> <p>18 position, that's correct.</p> <p>19 Q Okay. Is there a reason why he would be</p> <p>20 prone at that particular time or -- as opposed to</p> <p>21 say sitting up or having his leg elevated or</p> <p>22 anything like that?</p> <p>23 A No, I don't think -- no particular</p> <p>24 reason.</p>

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<p>1 Q But your memory is that he was prone; is 2 that correct? 3 A That's correct, yes. 4 Q And did he remain that way for the 5 entire time of the transport? 6 A That's correct. 7 Q Where was it that you first saw 8 Mr. Koran when you came to the Sherborn Inn? 9 A I don't remember exactly where he was. 10 Q Okay. Did he have a vehicle? 11 A I don't know. 12 Q If he did, you didn't see a vehicle; is 13 that -- 14 A I don't know. 15 Q Yeah. Okay. Where did you transport 16 Mr. Koran to? 17 A MetroWest Natick. 18 Q Okay. When you -- by the way, the -- 19 the times that are listed for dispatch, do you see 20 them on there? 21 A Yes. 22 Q They're in military time, right? 23 A Yes. 24 Q Yeah. And 6:46 sound like the right</p>	<p>1 Q I see. Okay. So you write them, but 2 you don't -- you don't actually look at your watch 3 and say, I'm doing it based on this particular 4 time; is that what you're saying? 5 A That is correct. 6 Q Okay. All right. So -- 7 A The only times -- 8 THE WITNESS: Can I -- 9 MR. LEEDBERG: Yeah, go ahead. 10 A The only time I look at my watch is if 11 I'm doing something, if I'm performing something 12 on the patient. 13 Q Taking a pulse or something? 14 A Yes. 15 Q How long would you estimate it 16 ordinarily takes to get from the Sherborn Inn to 17 the MetroWest Hospital? 18 A 10 minutes, 15 minutes. 19 Q Okay. All right. 6:52, about -- 20 approximately five minutes after you arrived at 21 the scene, would that be a time that you 22 entered -- 23 A That would be a time, yes. 24 Q -- when you took the vital signs; is</p>
Page 23	Page 25
<p>1 time for the dispatch, the initial dispatch? 2 A Yes. 3 Q And I guess you've said it's just down 4 the street so a minute later would be -- 5 A It's right there. 6 Q Yeah. Okay. And then the departure 7 time seems to be 7:08 based on what's listed on 8 there. Does that sound like the right amount of 9 time that you were at the scene, about 20 minutes 10 or so, 21 minutes I guess technically? 11 A I don't remember exactly. 12 Q Okay. And then the -- the departure 13 time and then the hospital arrival time looks like 14 1950 or 1956. Does that sound right in terms of 15 the time it would take you to get to the hospital? 16 THE WITNESS: I don't know how to 17 answer that. 18 MR. LEEDBERG: If it doesn't sound 19 right, maybe it's -- if it's -- explain it, if you 20 can. 21 A Well, I can -- I -- we get these times 22 from dispatch. We don't clock things as they 23 happen. We call in and dispatch tells us what our 24 times are.</p>	<p>1 that correct? 2 A Yes, that would be. 3 Q Okay. And you took the -- well, why 4 don't you tell me what each of the blocks means if 5 you would, please. 6 A LOC, level of consciousness, times 7 three. 8 Q What does that mean? 9 A It basically means I did three 10 observations on his level of consciousness, 11 meaning did he answer me when I spoke with him, 12 was he cognizant of what I was saying, and did he 13 appear to have good motor function, good, you 14 know. The second was the blood pressure. 15 Q Yeah. And -- I see it there, but why 16 don't you tell me what it says, just to be clear. 17 A 160 over 120. 18 Q Is that high? 19 A Relatively high I would -- I would say, 20 yes. 21 Q And what's the next reading? 22 A Pulse. 23 Q Yeah. What's that? 24 A Would be -- it would be 80.</p>

7 (Pages 22 to 25)



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<p>1 Q And is that --</p> <p>2 A That's in normal range.</p> <p>3 Q Normal range, okay.</p> <p>4 What's the next item?</p> <p>5 A That -- that would be his respiration,</p> <p>6 his breathing --</p> <p>7 Q Okay.</p> <p>8 A -- and it was normal range.</p> <p>9 Q I can't make that out at all. Is that</p> <p>10 what that says?</p> <p>11 A Yeah, that's normal range.</p> <p>12 Q Okay. Sorry. I thought it was</p> <p>13 something scratched out; I couldn't tell. Thank</p> <p>14 you.</p> <p>15 Okay. So is it likely that within</p> <p>16 five minutes after arriving at the scene you were</p> <p>17 taking Mr. Koran's vitals?</p> <p>18 A Yeah, I would say -- yeah, I would say</p> <p>19 so. That's typical, yes.</p> <p>20 Q Okay. So whatever -- whatever problems</p> <p>21 there were initially with Mr. Koran wanting</p> <p>22 treatment or not wanting treatment, at least</p> <p>23 within five minutes after you got there, he was --</p> <p>24 he was submitting to having you take his vital</p>	<p>1 the ambulance?</p> <p>2 A I don't remember. I don't remember</p> <p>3 whether --</p> <p>4 Q Well --</p> <p>5 A Whether he -- I don't remember.</p> <p>6 Q Okay. Let me ask it this way.</p> <p>7 Do you recall while you were at the</p> <p>8 Sherborn Inn taking the stretcher out of the</p> <p>9 ambulance?</p> <p>10 A I don't remember. I don't remember</p> <p>11 that.</p> <p>12 Q Okay. So -- well, there's -- and if I'm</p> <p>13 saying this wrong, you correct me. There's only</p> <p>14 two ways he could be on the stretcher; one would</p> <p>15 be if you brought the stretcher out and he got on</p> <p>16 it; the other would be if he got into the</p> <p>17 ambulance and then got on the stretcher; is that a</p> <p>18 fair statement?</p> <p>19 A That's correct, that's fair, yes.</p> <p>20 Q And you don't remember which it was?</p> <p>21 A No, I don't.</p> <p>22 Q Okay. When -- what was the weather like</p> <p>23 at that time, do you recall?</p> <p>24 A I think it was good weather. I believe</p>
Page 27	Page 29
<p>1 signs apparently; is that a fair statement?</p> <p>2 A He submitted, yes.</p> <p>3 Q Okay. All right. So you transport him</p> <p>4 to the MetroWest Hospital. What happens there?</p> <p>5 A We unload him from the ambulance.</p> <p>6 Q Okay. And you say we. Tell me, if you</p> <p>7 would, just what the procedure was. Were you</p> <p>8 still in the back with him?</p> <p>9 A Yes, yes, I was.</p> <p>10 Q Okay. And what happened?</p> <p>11 A I waited for Scott to open the doors and</p> <p>12 release the stretcher. Scott released the</p> <p>13 stretcher, we guide him out, and that's when it</p> <p>14 dropped.</p> <p>15 Q Okay. Scott opens the back doors of the</p> <p>16 ambulance from the outside?</p> <p>17 A That's correct.</p> <p>18 Q Is that something you can't do from the</p> <p>19 inside?</p> <p>20 A You can, but you can't. I mean, it has</p> <p>21 a latch, but you have to -- you have to be at the</p> <p>22 head of the stretcher.</p> <p>23 Q When Mr. Koran went into -- went on the</p> <p>24 stretcher, did he get on the stretcher from inside</p>	<p>1 it was good weather. It wasn't -- I know it</p> <p>2 wasn't raining or anything like that.</p> <p>3 Q Was there snow on the ground, do you</p> <p>4 recall?</p> <p>5 A No, I don't recall whether or not -- no.</p> <p>6 Q Okay. Was it cold?</p> <p>7 A I don't think so.</p> <p>8 Q All right. If I -- if I have the</p> <p>9 picture correctly, Mr. Koran sits on the back of</p> <p>10 the ambulance and takes his shoe off or you take</p> <p>11 his shoe off?</p> <p>12 A Um-hm.</p> <p>13 Q Which was it, did you take it off or did</p> <p>14 he take it off?</p> <p>15 A I don't remember exactly whether it was</p> <p>16 him or me.</p> <p>17 Q Okay. Did you examine his foot while he</p> <p>18 was sitting on the back of the ambulance?</p> <p>19 A Yes.</p> <p>20 Q Okay.</p> <p>21 A Yes.</p> <p>22 Q And then did you leave his shoe off</p> <p>23 during transport?</p> <p>24 A Yes.</p>

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<p>1 Q All right. When he -- how did he get 2 into the ambulance with his shoe off; did someone 3 assist him or did you bring the stretcher down and 4 put him in on the stretcher? 5 MR. LEEDBERG: Objection as to form. 6 Q Do you understand what I'm asking you? 7 A I understand what you're asking me, but 8 I don't remember exactly. 9 Q What would your usual procedure be if 10 you had someone who didn't have a shoe on in those 11 circumstances? 12 A You would bring the stretcher out. 13 Q Okay. It would be difficult with no 14 shoe on for him to step into it, wouldn't it -- 15 MR. LEEDBERG: Objection as to form. 16 Q -- step into the ambulance? 17 MR. LEEDBERG: Objection as to form. 18 Answer if you can. 19 A Yeah, I think that would be difficult, 20 yeah. 21 Q And if you had a -- if you had a 22 question as to what the injury was to his foot, 23 you probably wouldn't want him to put any weight 24 on it, particularly as a barefoot, would you --</p>	<p>1 Q Was he assisting you too, do you 2 remember? 3 A I don't remember whether he -- whether 4 he did or not. 5 Q Okay. He was at the scene I think you 6 said? 7 A He was at the scene. He was at the 8 scene. 9 Q Okay. Did he go to the hospital with 10 you? 11 A No, he didn't. 12 Q In any event, at some point Mr. Koran is 13 strapped to the stretcher and the ambulance goes 14 to the MetroWest Hospital; is that right? 15 A That's correct. 16 Q Okay. You get there, and you've 17 indicated that Scott would have opened the doors 18 from the outside? 19 A That's correct. 20 Q Okay. And you would have been at the -- 21 looking in, you would have been at the back or the 22 head end of the stretcher; is that correct? 23 A That's correct. 24 Q Okay. And what -- what did Scott do in</p>
Page 31	Page 33
<p>1 MR. LEEDBERG: Objection as to form. 2 Q -- in terms of your usual procedure? 3 A Yes, you would not want him to put 4 weight on it, that's correct. 5 Q Okay. Does that make it -- I understand 6 you don't presently recall, but does that make it 7 more likely that the procedure you would follow 8 would be to have him get on the -- pull the 9 stretcher out and have him get on the stretcher 10 rather than have him step up into the ambulance? 11 MR. LEEDBERG: Objection as to form. 12 A Yes, that would be -- procedurally, yes, 13 that would be the way you'd do it. 14 Q Okay. In any event, he's in the 15 ambulance. Is he strapped to the stretcher? 16 A Yes. 17 Q Okay. Did you strap him yourself? 18 A We all did -- we all do. 19 Q Who's -- who's we all? 20 A Well, myself, Scott, anybody that would 21 be there. 22 Q Okay. Would that be your -- is it Ron 23 Buckler? 24 A Yes.</p>	<p>1 terms of getting Mr. Koran out of the ambulance? 2 A I don't know what he did. 3 Q Well, you said something before about he 4 unlocked the -- 5 A Typically that's what -- yeah, I can't 6 answer as to what he actually -- what he did, 7 but.... 8 Q Okay. Where was the -- how does that 9 locking device work? 10 A It's a push bar. 11 Q And where is it located? 12 A You push it. It's located on the 13 right -- sorry, I can't remember -- left -- right 14 side. Push it and it unlocks. 15 Q In terms of access to it, is this 16 something that's on the floor? 17 A Yes, it's mounted to the floor. 18 Q Okay. So is it difficult for you at the 19 head of the stretcher to get to that device? 20 A You could not. 21 Q Okay. So then Scott has to be the one 22 that unlocks that device; is that right? 23 A That's correct. 24 Q Okay. So it's -- is it fair to say that</p>

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<p style="text-align: right;">Page 34</p> <p>1 he must have unlocked the device or you couldn't  2 have gotten the stretcher out of the ambulance?  3 A That's correct.  4 Q Okay. And does that mean that the two  5 of you were then taking the stretcher out of the  6 ambulance, him at the foot and you at the head?  7 A That's correct.  8 Q Okay. What's your understanding as to  9 how the stretcher works in terms of taking it out  10 of the ambulance, what -- what -- what  11 mechanically occurs in order to bring it out?  12 A You roll it out and the wheels drop  13 down.  14 Q Okay. What makes them do that, is it --  15 is it gravity or is there some device that's --  16 that causes that?  17 MR. LEEDBERG: Objection as to form.  18 Answer if you know.  19 A There's a release.  20 Q Okay. You have to press -- you have to  21 press something in order for those legs to drop  22 down?  23 A I'm not sure if it's -- yes, you squeeze  24 the....</p>	<p style="text-align: right;">Page 36</p> <p>1 A The legs drop down --  2 Q Yeah.  3 A -- we roll him out and it dropped.  4 Q Okay. To what level did it drop? To  5 what height, I guess, above the ground is what I'm  6 trying to say.  7 A I don't remember if it was the first or  8 the second or if -- if it was the first or it was  9 all the way down. I don't remember which one it  10 dropped to.  11 Q On your body --  12 A Um-hm.  13 Q -- and by the way, Mr. Koran is prone at  14 this time, he's not seated?  15 A I don't remember if he -- if he was  16 prone or seated -- if he was --  17 Q Okay. But let's -- let's just talk  18 about the prone -- the prone level.  19 A Um-hm.  20 Q Assume for the moment he was completely  21 prone. You mentioned you weren't sure which one  22 of two levels it went down to. Where would those  23 two levels come to on your body; could you tell me  24 that?</p>
<p style="text-align: right;">Page 35</p> <p>1 Q Okay. And what happens when they drop  2 down?  3 A They drop down, they hit the -- they hit  4 the ground, when it clicks, you roll away.  5 Q Okay. So there's -- is there -- is  6 there an audible sound that you hear when the legs  7 come down?  8 A Yes, you hear them come down, yes.  9 Q I mean, you mentioned -- you said click.  10 Do you actually hear a click sound?  11 A Yeah, you do. Yes, you do.  12 Q And is that something that you need to  13 hear to -- so you know that the legs are, in fact,  14 locked in place?  15 A Yes. Yes.  16 Q If the legs didn't click, would the legs  17 -- would they hold the stretcher up?  18 MR. LEEDBERG: Objection as to form.  19 Go ahead and answer.  20 A I don't know. That's the first time  21 I've ever -- I don't know.  22 Q Okay. All right. So you and Scott are  23 taking Mr. Koran out on the stretcher, and as  24 you're doing it, what exactly happens?</p>	<p style="text-align: right;">Page 37</p> <p>1 A Standing in the ambulance or on the  2 ground?  3 Q Oh, well, that's a good question. Were  4 you standing -- were you still in the ambulance  5 when this occurred?  6 A Yes.  7 Q Okay. Did you come down from the  8 ambulance at that point; did you step down from  9 the ambulance?  10 A Yes.  11 Q Okay. When you were standing next to  12 the stretcher at that point, where did the  13 stretcher come to on your body?  14 A I don't remember exactly. I don't  15 remember exactly.  16 Q Okay. Was it above the knees or below  17 the knees?  18 A I don't remember exactly. It was --  19 Q Okay. What happened? You stepped out  20 of the ambulance and Mr. Koran was at one of those  21 levels. What -- what happened at that point? Was  22 there any conversation? Did you talk to him? Did  23 he speak with you or --  24 MR. LEEDBERG: I object as to the</p>

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<p style="text-align: right;">Page 38</p> <p>1 form. Go ahead and answer it.</p> <p>2 A Yes, I said something to the effect of,</p> <p>3 That was strange. And then I asked Mr. Koran, you</p> <p>4 know, Are you okay? How are you? Are you fine?</p> <p>5 Q What did he say?</p> <p>6 A He said he was fine. He said he's okay.</p> <p>7 He just kind of looked up at me and....</p> <p>8 Q Okay. And what happened next?</p> <p>9 A We went -- we went right in.</p> <p>10 Q Okay. Was Mr. Koran at the level that</p> <p>11 patients usually are when you transport them on</p> <p>12 the stretcher?</p> <p>13 A No, no, he was not.</p> <p>14 Q So what did you do? Did you bring him</p> <p>15 back up to that level or did he stay at the level</p> <p>16 that the stretcher had fallen to?</p> <p>17 A He stayed at the level, he stayed at</p> <p>18 that level.</p> <p>19 Q Okay. Why was that?</p> <p>20 A I don't know. We just got him in there.</p> <p>21 Q Was it possible to raise him back up to</p> <p>22 a higher level?</p> <p>23 A I don't remember if we tried that or</p> <p>24 not.</p>	<p style="text-align: right;">Page 40</p> <p>1 level at which patients usually enter the</p> <p>2 hospital? A different height I'm talking about.</p> <p>3 A I don't recall if anything was said</p> <p>4 about it, no.</p> <p>5 Q Okay. And what did you do in terms of</p> <p>6 moving Mr. Koran from the stretcher to any other</p> <p>7 location?</p> <p>8 A I know they directed us to -- to one of</p> <p>9 the rooms, but I'm not sure how we got him onto</p> <p>10 the -- I don't remember how we got him onto the</p> <p>11 hospital bed.</p> <p>12 Q Okay. What would be your usual</p> <p>13 practice?</p> <p>14 A The usual practice would be that</p> <p>15 everybody line up on one side and the other side,</p> <p>16 take the sheet and lift him over --</p> <p>17 Q Okay.</p> <p>18 A -- or backboard, sheet or backboard,</p> <p>19 whatever.</p> <p>20 Q Do you have a memory of Mr. Koran at</p> <p>21 all; what he looked like?</p> <p>22 A (Witness nodded.)</p> <p>23 Q No?</p> <p>24 A No.</p>
<p style="text-align: right;">Page 39</p> <p>1 Q Okay. Would it have -- well, I guess</p> <p>2 you said this never happened before, but your</p> <p>3 ordinary practice was to transport people at a</p> <p>4 higher level; is that right?</p> <p>5 A Yes, that's correct.</p> <p>6 Q Okay. So does it seem likely that you</p> <p>7 would have tried to raise him back to that level?</p> <p>8 MR. LEEDBERG: Objection as to form.</p> <p>9 A Yeah, it seems like we would have tried</p> <p>10 that.</p> <p>11 Q And you don't have a recollection as to</p> <p>12 whether or not you were unable to do that for some</p> <p>13 reason.</p> <p>14 MR. LEEDBERG: Objection as to form.</p> <p>15 A I don't remember exactly trying to do</p> <p>16 it.</p> <p>17 Q Okay. Did you bring him inside the</p> <p>18 hospital?</p> <p>19 A Yes, we did.</p> <p>20 Q Okay. And when you got inside the</p> <p>21 hospital, what happened?</p> <p>22 A Turned him over to the charge nurse.</p> <p>23 Q Okay. Did anyone make note of the fact</p> <p>24 that he was at a level that was different from the</p>	<p style="text-align: right;">Page 41</p> <p>1 Q If I suggested he was a pretty big guy,</p> <p>2 would that -- would you have a memory one way or</p> <p>3 the other?</p> <p>4 A No.</p> <p>5 Q No. Okay.</p> <p>6 If you followed the usual procedure,</p> <p>7 would you have been able to do that if the level</p> <p>8 of the stretcher was lower than the level you were</p> <p>9 transferring him to? Do you understand what I'm</p> <p>10 asking you?</p> <p>11 A Yeah, I think so. I think so. Usual</p> <p>12 procedure you have a lot of -- a lot of people</p> <p>13 there to help you, and, yes, yes, you -- there's</p> <p>14 usually six to eight people and that's --</p> <p>15 Q Okay.</p> <p>16 A -- that can be accomplished.</p> <p>17 Q But usually aren't you going from a</p> <p>18 level of the stretcher to the level of the bed or</p> <p>19 whatever that is approximately the same height?</p> <p>20 A Yes. They're approximately the same</p> <p>21 height, yeah.</p> <p>22 Q So if the stretcher was at that lower</p> <p>23 level, you'd have to bring him up from that level</p> <p>24 to the level of the bed; do you understand what</p>

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1 I'm asking?  
 2 A Um-hm.  
 3 Q And do you have any recollection as to  
 4 whether or not that occurred and whether there was  
 5 any -- as to whether or not it was necessary to  
 6 bring him from a -- a different level to the level  
 7 of the bed?  
 8 A I don't remember. I don't remember.  
 9 Q Okay. All right. What did you do after  
 10 Mr. Koran was transferred to the bed or whatever?  
 11 A Called dispatch and went to do the  
 12 paperwork, went to do my paperwork.  
 13 Q Which is what?  
 14 A Which is basically this (indicating).  
 15 Called dispatch for the times and then just a  
 16 quick write-up as to what the call was about.  
 17 Q Okay. Are you talking about the  
 18 write-up on here (indicating)?  
 19 A Yes.  
 20 Q Did you fill out any other paperwork in  
 21 addition to this document?  
 22 A Typically, no. No, I don't recall doing  
 23 that.  
 24 Q Okay. Do you remember whether in this

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1 case you filled out anything that was different?  
 2 You said typically. I mean, was it because  
 3 something had happened, would you fill out any  
 4 additional paperwork?  
 5 A Other than the insurance forms, some  
 6 insurance forms, sometimes it's done by, you know,  
 7 we get the information. Most of the time the  
 8 hospital gets the information.  
 9 Q You're talking about the insurance forms  
 10 for Mr. Koran to get his treatment?  
 11 A Yes.  
 12 Q Yeah, okay. I understand.  
 13 Okay. So at that point you've done  
 14 your paperwork. What did you do next?  
 15 A Left the hospital, went back to the  
 16 station.  
 17 Q Okay. Before you did that, you had to  
 18 put the -- you had to put the cot back in the --  
 19 into the ambulance; is that right -- I mean,  
 20 stretcher, rather, back into the ambulance?  
 21 A I believe Scott did that. Typically  
 22 what we do is one does the paperwork, one loads  
 23 the am -- one puts the ambulance back in service.  
 24 Q Okay. Now, in order to get the

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1 stretcher back into the ambulance it has to be at  
 2 a certain height; is that right?  
 3 A That's correct.  
 4 Q Okay. Do you know whether or not there  
 5 was -- there was any problem in getting the  
 6 ambulance -- the stretcher back to the right  
 7 height for the ambulance?  
 8 A I didn't do it.  
 9 Q I understand. But did you -- did you  
 10 learn from Scott that he had any problem doing it?  
 11 A I don't remember exactly what he said,  
 12 but he -- he just told me, well, he got it back  
 13 in, he got it up and got it in. So --  
 14 Q Okay.  
 15 A -- I don't know exactly what -- I don't  
 16 remember exactly what he said.  
 17 Q But you're clear in your own mind you  
 18 didn't assist him in getting it in?  
 19 A No, no, I don't recall doing that.  
 20 Q Okay. So mechanically, to get it back  
 21 into the ambulance, the only way he could get it  
 22 back in would be to get that end raised back up so  
 23 that it would go in; is that a fair statement?  
 24 MR. LEEDBERG: Objection as to form.

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1 Answer if you can.  
 2 A The -- the stretcher has to be in the  
 3 upright position to load it, the complete upright  
 4 position to load it.  
 5 Q Okay. Because if it's down, it would  
 6 just hit the bumper, it wouldn't go up and over;  
 7 is that --  
 8 A Right.  
 9 Q Do I understand that correctly?  
 10 A You understand that correctly.  
 11 Q So one way or another he must have got  
 12 it back up to the height necessary to do that.  
 13 That's true, isn't it?  
 14 MR. LEEDBERG: Objection as to form.  
 15 A I don't know what he did, but he must  
 16 have.  
 17 Q Okay. Any idea what that thing weighs?  
 18 A No. Not offhand, no. An idea what -- I  
 19 don't know what it weighs. I have no idea.  
 20 Q Could one person lift it up and put it  
 21 in by himself? You know, just physically lift it  
 22 up off the ground and put it in the back of the  
 23 ambulance?  
 24 A I don't know. I never tried it. I

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<p>1 don't know. I never -- I never had to load it by 2 myself.</p> <p>3 Q Okay. All right. Where did you ride 4 when you went back to the -- to the station?</p> <p>5 A The passenger seat if I --</p> <p>6 Q Okay. Did you examine the stretcher at 7 all after it was back in the ambulance?</p> <p>8 A I don't remember if we did or not. I 9 don't remember offhand.</p> <p>10 Q Okay. When you get back to the station, 11 do you remember whether or not you examined the 12 stretcher?</p> <p>13 A I don't remember, no, whether or not we 14 did.</p> <p>15 Q Did you have a concern about whether or 16 not the stretcher was going to operate properly 17 after that?</p> <p>18 A Did I? No.</p> <p>19 Q Well, if you -- say you had another call 20 that evening, you would have had to use that 21 stretcher; is that right?</p> <p>22 A Yes, that's correct.</p> <p>23 Q Okay. So were you concerned that it 24 might drop again?</p>	<p>1 Q Okay. And tell me about your 2 conversation with her.</p> <p>3 A She asked me if -- if anything had 4 happened on that -- this particular call, and I 5 told her what had happened, and she asked me to 6 write an addendum explaining what had happened. I 7 did that and I e-mailed it to her.</p> <p>8 Q Okay. Where is the addendum?</p> <p>9 A The addendum, I don't know.</p> <p>10 Q It's not this addendum that's on here, 11 because you told me you didn't write that; is that 12 correct?</p> <p>13 A No, I didn't write that.</p> <p>14 Q Where did you e-mail from.</p> <p>15 A My office.</p> <p>16 Q Your office in West Bridgewater?</p> <p>17 A Yeah.</p> <p>18 Q Think you still got it?</p> <p>19 A I know I don't because I looked for it.</p> <p>20 Q And where did you e-mail it to?</p> <p>21 A To Pam Dowse's e-mail address.</p> <p>22 Q Okay. Is that a town address or a 23 personal e-mail address?</p> <p>24 A I think it's her personal -- I don't</p>
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<p>1 A No, no, I don't -- I don't recall having 2 a concern about that.</p> <p>3 Q Okay. Do you remember talking to anyone 4 when you got back about what had happened?</p> <p>5 A What do you mean about what happened, 6 about the call with the stretcher?</p> <p>7 Q Yeah, with the stretcher, yeah.</p> <p>8 A No, I don't think we -- no, I don't 9 remember saying -- talking to anybody about that.</p> <p>10 Q Okay. Was Ron Buckler here?</p> <p>11 A I don't know. I don't remember.</p> <p>12 Q Okay. Did you ever speak with anyone 13 after that trip about the stretcher and about the 14 problem with the stretcher?</p> <p>15 A Yes.</p> <p>16 Q Who did you talk to?</p> <p>17 A Pam Dowse, I believe.</p> <p>18 Q And what's -- Pam Dowse, D-O-W-S-E, 19 right?</p> <p>20 A Yes.</p> <p>21 Q What's Pam Dowse's position or role?</p> <p>22 A At that time she was -- I don't remember 23 whether she was a lieutenant or captain of the 24 ambulance.</p>	<p>1 know. I think it's her personal e-mail address, 2 but it's the same one that's on all of the fire 3 department correspondence.</p> <p>4 MR. LEEDBERG: I'm sorry, my phone 5 -- my office keeps buzzing me. It must be 6 something important.</p> <p>7 (Off record.)</p> <p>8 Q I'm looking at a couple of pieces of the 9 fire department letterhead here, and I don't see 10 an e-mail address. Do you remember what the 11 e-mail address is?</p> <p>12 A No.</p> <p>13 Q Is it -- does the town of Sherborn have 14 a town-wide e-mail address, do you think, or is 15 there a separate one for the fire department?</p> <p>16 A It's just an -- everybody just gives 17 their e-mail, and it just comes out on -- when you 18 receive an e-mail, there's like 40 or 50 of them 19 on there, and I just picked hers out. I don't 20 remember exactly which one it was, though, or what 21 it said. J. Dowse or something like that. I'm 22 not sure.</p> <p>23 MR. LEEDBERG: All right. I'll look 24 into that and see if I can find some information</p>

13 (Pages 46 to 49)



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Page 50	Page 52
<p>1 for you on that.</p> <p>2 MR. DURSO: All right.</p> <p>3 Q So when was it that you would have done</p> <p>4 that -- that e-mail in relation to the event</p> <p>5 itself. Would it have been sometime shortly after</p> <p>6 February 6, 2003?</p> <p>7 A After that date, yes. Yes.</p> <p>8 Q I mean, but --</p> <p>9 A I don't remember exactly.</p> <p>10 Q -- that month?</p> <p>11 A How long after. I don't remember.</p> <p>12 Q Okay. All right. And aside from that</p> <p>13 addendum that you did the e-mail on, did you ever</p> <p>14 fill out anything else or write anything else</p> <p>15 about the incident?</p> <p>16 A No, that was it.</p> <p>17 Q Okay. Was there anybody else you spoke</p> <p>18 to about the incident other than Pam Dowse?</p> <p>19 A I don't remember offhand. You mean at</p> <p>20 that time; is that what you're asking me?</p> <p>21 Q No, at any time afterwards?</p> <p>22 A Sure. I've spoken with the chief about</p> <p>23 it a couple of times and....</p> <p>24 Q And that's Chief....</p>	<p>1 Q What else is there about the demeanor of</p> <p>2 the patient that you haven't told me?</p> <p>3 A I just -- I just thought it was odd that</p> <p>4 he was more concerned about the woman that ran</p> <p>5 over his foot and the cops than he was about his</p> <p>6 foot. I just thought that was odd.</p> <p>7 Q Okay. I'm going to show you what was</p> <p>8 marked Exhibit 2 in Scott's deposition. Take a</p> <p>9 look at that for a second, if you would, please,</p> <p>10 okay?</p> <p>11 (Document exhibited to witness.)</p> <p>12 (Witness perusing document.)</p> <p>13 A Okay.</p> <p>14 Q Have you ever seen that before?</p> <p>15 A I don't recall. I don't recall seeing</p> <p>16 this. So Scott did an incident report.</p> <p>17 Q Yeah.</p> <p>18 A Okay.</p> <p>19 Q Do you remember whether or not you</p> <p>20 assisted him in any way in filling that out?</p> <p>21 A I did not. I would have signed it.</p> <p>22 Q Okay. Were you aware before this that</p> <p>23 he had done this incident report?</p> <p>24 A No, I don't remember. I don't remember</p>
Page 51	Page 53
<p>1 A McPherson.</p> <p>2 Q McPherson, yeah.</p> <p>3 Okay. Other than Chief McPherson,</p> <p>4 anybody else you've spoken to that you can</p> <p>5 remember?</p> <p>6 MR. LEEDBERG: Besides me.</p> <p>7 Q Yeah, besides lawyers.</p> <p>8 A Scott.</p> <p>9 Q Did you and Scott talk about it on the</p> <p>10 way back from the trip?</p> <p>11 A About the stretcher? I don't know. I</p> <p>12 don't remember. We usually talk about fishing.</p> <p>13 Q Where do you go fishing?</p> <p>14 A Cape, down the Cape.</p> <p>15 Q Did anyone ever say anything to you</p> <p>16 about a handle being bent?</p> <p>17 A Never heard anything about that.</p> <p>18 Q Okay. Is there anything else about this</p> <p>19 incident that -- that you can recall that you</p> <p>20 haven't told me?</p> <p>21 A Other than the demeanor of the patient,</p> <p>22 I think I've -- I think I've told you everything.</p> <p>23 Q Okay.</p> <p>24 A My --</p>	<p>1 whether or not....</p> <p>2 Q Okay. And I want to show you what was</p> <p>3 marked Exhibit 4 in Scott's deposition.</p> <p>4 (Document exhibited to witness.)</p> <p>5 Q Does this appear to you to be the type</p> <p>6 of stretcher that we're talking about?</p> <p>7 (Indicating.)</p> <p>8 A It looks like it. I don't know if it's</p> <p>9 the exact....</p> <p>10 (Witness perusing document.)</p> <p>11 A Yes.</p> <p>12 Q Okay. Referring to page 11 in that</p> <p>13 exhibit, are you able to tell me looking at this</p> <p>14 page the position that the -- that the stretcher</p> <p>15 went into when it came out of the -- out of the</p> <p>16 ambulance at the hospital?</p> <p>17 A From that picture, no. I -- I couldn't</p> <p>18 tell. I'd have to be standing at the side away</p> <p>19 from it to judge. I couldn't tell.</p> <p>20 Q Okay.</p> <p>21 A I was standing up in the ambulance.</p> <p>22 Q But didn't you come down and stand next</p> <p>23 to it after that?</p> <p>24 A Yes, yes, I did.</p>

14 (Pages 50 to 53)

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Page 54	Page 56
<p>1 Q Okay. So based on standing next to it, 2 can you -- can you tell me from any of these as to 3 what the position was? 4 A I can't tell you exactly. I'm not -- I 5 don't know if it was this one or this one. I'm 6 not sure exactly which position. (Indicating.) 7 Q Okay. I'm going to show you a picture 8 of the stretcher on page 7. As the stretcher is 9 coming out of the ambulance, what, if anything, do 10 you do in order to have the legs come down? 11 A There is a -- a lever -- 12 Q Okay. 13 A -- and you grab it and the legs just 14 drop. 15 Q Okay. There's a lever at -- at the head 16 end? 17 A Yes. 18 Q Okay. Is there also a lever at the foot 19 end? 20 A Yes, I believe so, yes. 21 Q Okay. Do you have to press both levers 22 or will either lever let the legs come down? 23 MR. LEEDBERG: Objection as to form. 24 Go ahead.</p>	<p>1 MR. LEEDBERG: Objection as to form. 2 A You have to walk around to that side of 3 the stretch -- you can't reach it from the head or 4 the foot. 5 Q Yeah. Okay. So what do you do to it to 6 load it into the -- what do you do to load it into 7 the ambulance; you have to release that lever? 8 MR. LEEDBERG: Objection as to form. 9 A Yes, you have to unlock it, yes. 10 Q Okay. And then you push it into the 11 ambulance; is that what you're saying? 12 A That is correct. 13 Q Okay. And when you're coming out of the 14 ambulance and the legs lock down, that lever moves 15 into a locked position? 16 A That is -- that is correct. I've never 17 watched it. I believe it does, though. It's 18 locked when you have to load it back, so.... 19 Q Okay. Did anyone ever say to you 20 anything about that lever being bent? 21 A Never heard anything about that lever, 22 no. 23 Q Never heard anything at all about it 24 bent or not bent; is that right?</p>
Page 55	Page 57
<p>1 A You know what, I don't know if you have 2 to do them both at the same time. I don't know. 3 I don't know. I've always been at one end or the 4 other, so.... 5 Q Yeah, you can't be at both ends. How 6 about the auxillary lock, do you know what that 7 does? 8 A The lock on the side? 9 Q Yeah. (Indicating.) 10 A If it's still -- still the same, it 11 just -- it locks the -- it locks the stretcher in 12 that position. 13 Q Okay. And does that move into place 14 when the legs come down? 15 MR. LEEDBERG: Objection as to form. 16 A I believe it's an automatic click, and I 17 never really paid attention to what position. I 18 just believe it lock -- I believe it moves 19 automatically. 20 Q Okay. And is that a device that would 21 release the legs so that they would fold? 22 A During loading or unloading? 23 Q Well, you can't reach it while you're 24 loading; is that right?</p>	<p>1 A Nobody said anything to me about the 2 level, no. I don't recall -- I don't remember 3 anything about the lever. 4 Q All right. Thank you. 5 MR. DURSO: Okay, I think we're 6 almost done. Just give me two minutes here 7 and.... 8 (Pause.) 9 MR. DURSO: Okay, I think I'm all 10 done with the questions I have for the witness at 11 this time, but I just want to say for the record 12 that if there's anything significant in the e-mail 13 if we get it, then I may have to ask him to come 14 back. 15 MR. LEEDBERG: Sure. We'll leave it 16 open. 17 MR. DURSO: Or I may have to go down 18 and question you in Costa Rica. 19 THE WITNESS: Well, be more than 20 happy to have you come down and question me down 21 there. You can all come down. 22 MR. LEEDBERG: If I do locate the 23 e-mail if it's still available and it's not 24 privileged, work product, or prepared in</p>

15 (Pages 54 to 57)



Dominick Clark Tolson

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	Page 58	Page 60	
1	anticipation of litigation, then we'll turn it	1	E R R A T A S H E E T
2	over --	2	I, DOMINICK CLARK TOLSON, the
3	MR. DURSO: Yeah.	3	within-named deponent do hereby certify that I
4	MR. LEEDBERG: -- and if there's any	4	have read the foregoing transcript of my
5	questions you have, we'll be happy to --	5	testimony, and further certify that said
6	MR. DURSO: Sure. I understand.	6	transcript is a true and accurate record of said
7	MR. LEEDBERG: -- meet again.	7	testimony (with the exception of the following
8	MR. DURSO: Okay. Thank you.	8	corrections listed below):
9	(Off record at 2:35 p.m.)	9	Page Line Correction
10		10	_____
11		11	_____
12		12	_____
13		13	_____
14		14	_____
15		15	_____
16		16	_____
17		17	_____
18		18	_____
19		19	_____
20		20	Signed under the pains and penalties of
21		21	perjury this day of _____, 2006.
22		22	
23		23	
24		24	DOMINICK CLARK TOLSON

	Page 59
1	C E R T I F I C A T E
2	COMMONWEALTH OF MASSACHUSETTS
3	BRISTOL, SS
4	
5	I, Lori-Ann London, Registered
6	Professional Reporter and Notary Public in and for
7	the Commonwealth of Massachusetts, do hereby
8	certify:
9	That, DOMINICK CLARK TOLSON, the witness
10	whose deposition is hereinbefore set forth, was
11	duly sworn by me and that such deposition is a
12	true record of the testimony given by the witness
13	to the best of my knowledge, skill, and ability.
14	I further certify that I am neither
15	related to, nor employed by, any of the parties in
16	or counsel to this action, nor am I financially
17	interested in the outcome of this action.
18	IN WITNESS WHEREOF, I have hereunto set
19	my hand and seal of office this 2nd day of October
20	2006.
21	
22	Lori-Ann London, RPR
23	Notary Public
24	My commission expires: 6/15/2012

16 (Pages 58 to 60)

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(617) 542-0039

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**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 3**  
**EMT Scott Christensen's Deposition**



Volume: I

Pages: 1-96

Exhibits: 1-4

UNITED STATES DISTRICT COURT

DISTRICT OF MASSACHUSETTS

NO. 05-11454 RGS

----- X

Joseph H. Koran, and Kimberly Koran, individually  
and on behalf of Ana Koran, Joseph Koran, Jr., and  
Erik Koran, minors,,

Plaintiffs,

v.

Elizabeth Weaver and Town of Sherborn,

Defendants.

----- X

DEPOSITION OF SCOTT CHRISTENSEN

Tuesday, September 19, 2006

11:30 a.m.

SHERBORN Fire Department

22 North Main Street

Sherborn, Massachusetts

Reporter: Lori-Ann London, RPR



Scott Christensen

09/19/2006

<p>2</p> <p>1 APPEARANCES:</p> <p>2</p> <p>3 By Carmen L. Durso, Esquire and</p> <p>4 Matthew P. Coletti, Esquire</p> <p>5 LAW OFFICE OF CARMEN L. DURSO</p> <p>6 175 Federal Street</p> <p>7 Boston, Massachusetts 02110</p> <p>8 617.728.9123</p> <p>9 Appearing for the Plaintiffs</p> <p>10</p> <p>11 By Michael D. Leedberg, Esquire</p> <p>12 PIERCE, DAVIS &amp; PERRITANO, LLP</p> <p>13 Ten Winthrop Square</p> <p>14 Boston, Massachusetts 02110-1257</p> <p>15 617.350.0950</p> <p>16 Appearing for the Defendants</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p>4</p> <p>1 PROCEEDINGS</p> <p>2</p> <p>3 SCOTT CHRISTENSEN,</p> <p>4 a witness called for examination by the</p> <p>5 Plaintiffs, having been satisfactorily identified</p> <p>6 by the production of his Massachusetts driver's</p> <p>7 license, and duly sworn by the Notary Public, was</p> <p>8 examined and testified as follows:</p> <p>9 EXAMINATION</p> <p>10 BY MR. DURSO:</p> <p>11 Q State your name for the record, please.</p> <p>12 A Scott Christensen.</p> <p>13 Q And what's your current address?</p> <p>14 A 13 Moore Street.</p> <p>15 Q M-O-O-R-E?</p> <p>16 A Correct.</p> <p>17 Q In Sherborn?</p> <p>18 A Natick.</p> <p>19 Q What's your zip there?</p> <p>20 A 01760.</p> <p>21 Q What's your date of birth?</p> <p>22 A 5/16/72.</p> <p>23 Q What we're doing here today is called a</p> <p>24 deposition.</p>
<p>3</p> <p>1 INDEX</p> <p>2</p> <p>3 DEPOSITION OF: PAGE</p> <p>4 SCOTT CHRISTENSEN</p> <p>5</p> <p>6 EXAMINATION BY MR. DURSO 4</p> <p>7 EXAMINATION BY MR. LEEDBERG 93</p> <p>8 _____X</p> <p>9 EXHIBITS</p> <p>10 NO. PAGE</p> <p>11 1 Sherborn Fire Dept. Emergency Medical 11</p> <p>12 Services</p> <p>13 2 Fire &amp; Rescue Department 14</p> <p>14 3 Diagram 28</p> <p>15 4 Squadmate Booklet 80</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22 *Original exhibits retained by Mr. Durso</p> <p>23</p> <p>24</p>	<p>5</p> <p>1 A Um-hm.</p> <p>2 Q Have you ever done this before?</p> <p>3 A No.</p> <p>4 Q Okay. Are you a high school graduate?</p> <p>5 A Yes.</p> <p>6 Q What high school, what year?</p> <p>7 A Natick High, Class of '91.</p> <p>8 Q It's not that long ago, Scott.</p> <p>9 A I had to think there for a sec.</p> <p>10 Q After high school, did you have any</p> <p>11 further education?</p> <p>12 A No.</p> <p>13 Q Have you had any particular training of</p> <p>14 any kind in terms of your work here at the fire</p> <p>15 department?</p> <p>16 A I'm on a full-time department somewhere</p> <p>17 else. I've gone to the Massachusetts Fire</p> <p>18 Academy, recruit training, which also applies -- I</p> <p>19 mean, it's not -- it applies to here too; it's the</p> <p>20 same. They just don't require it in a call</p> <p>21 department, but....</p> <p>22 Q Okay. When you go to the academy, do</p> <p>23 you receive some certification?</p> <p>24 A Yes.</p>

2 (Pages 2 to 5)

Scott Christensen

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<p>6</p> <p>1 Q What is that?</p> <p>2 A It's a fire one and two and hazardous</p> <p>3 materials.</p> <p>4 Q And hazardous as well?</p> <p>5 A Yeah, hazardous material, operational.</p> <p>6 THE STENOGRAPHER: The what?</p> <p>7 A Operational awareness level I think they</p> <p>8 say it is.</p> <p>9 Q So you're a call fireman in --</p> <p>10 A In Sherborn.</p> <p>11 Q -- Sherborn.</p> <p>12 But you're also a full-time fireman</p> <p>13 somewhere else?</p> <p>14 A Correct.</p> <p>15 Q Where is that?</p> <p>16 A Lincoln, Mass.</p> <p>17 Q So do you work in Sherborn on a</p> <p>18 volunteer basis?</p> <p>19 A It's a call department; you get paid --</p> <p>20 Q Oh, you do?</p> <p>21 A -- the same as everybody else. You get</p> <p>22 paid when you go out on runs and training.</p> <p>23 Q Okay.</p> <p>24 A Volunteer department is when you don't</p>	<p>8</p> <p>1 Q About how long?</p> <p>2 MR. LEEDBERG: If you know. Don't</p> <p>3 guess.</p> <p>4 A Yeah, I don't know.</p> <p>5 Q Have you been working as an EMT for more</p> <p>6 than five years?</p> <p>7 A I believe so. I don't know that.</p> <p>8 Q Okay. We're gonna talk about something</p> <p>9 that happened in 2003 today.</p> <p>10 A Um-hm.</p> <p>11 Q In 2003 were you certified as an EMT?</p> <p>12 A Yes.</p> <p>13 Q Okay. And any idea how long before that</p> <p>14 you had been certified?</p> <p>15 A No, I can't.</p> <p>16 Q Okay. Prior to being certified as an</p> <p>17 EMT, what kind of fire duties did you have?</p> <p>18 A I worked here at least a good year as</p> <p>19 what they call first responder on the ambulance,</p> <p>20 sort of like an assistant, ride along helping the</p> <p>21 EMTs or the medics.</p> <p>22 Q And when, when did you do that?</p> <p>23 A I believe that was in 19 -- no, that was</p> <p>24 2001, I want to say, that winter.</p>
<p>7</p> <p>1 get any pay at all. It's just a --</p> <p>2 Q Right. The forms I looked at say call/</p> <p>3 volunteer. So I didn't -- I wasn't clear.</p> <p>4 A I think some people volunteer their</p> <p>5 time, I believe.</p> <p>6 Q Yeah. Okay. But you get paid when you</p> <p>7 actually perform duties here; is that right?</p> <p>8 A Correct.</p> <p>9 Q Does that mean being in here sitting</p> <p>10 here waiting for something to happen or --</p> <p>11 A One night a week when you're on the</p> <p>12 ambulance. I believe you get paid an hour for that</p> <p>13 night for the shift.</p> <p>14 Q Were you in the military?</p> <p>15 A No.</p> <p>16 Q What are the -- what was the training</p> <p>17 that you've had with regard to being an EMT?</p> <p>18 A You have the requirement. I think it's</p> <p>19 24 hours continuing ed, the 28 credits you have to</p> <p>20 get a year.</p> <p>21 Q So you're certified?</p> <p>22 A Yes.</p> <p>23 Q Okay. When were you first certified?</p> <p>24 A I can't answer that. I don't know.</p>	<p>9</p> <p>1 Q Okay.</p> <p>2 A I rode along with the ambulance helping</p> <p>3 them out, learning the steps of being an EMT</p> <p>4 and....</p> <p>5 Q Okay. And then at some point you took</p> <p>6 courses and tests and you got certified yourself?</p> <p>7 A Correct.</p> <p>8 Q Can you say with any certainty that the</p> <p>9 thing we're gonna talk about today in February of</p> <p>10 2003, that at that time you were certified?</p> <p>11 A I was certified as a -- I was an EMT,</p> <p>12 certified then.</p> <p>13 Q And since then have you remained</p> <p>14 certified as an EMT?</p> <p>15 A Yes.</p> <p>16 Q How long have you worked for the Lincoln</p> <p>17 Fire Department?</p> <p>18 A I want to say three, four years, give or</p> <p>19 take. I'm not sure on the exact.</p> <p>20 Q It's 2006. In February of 2003 were you</p> <p>21 working for Lincoln at that time?</p> <p>22 A I believe it was '04. It was in March</p> <p>23 -- now I think -- I started there as a call man in</p> <p>24 Lincoln in '03, in November I believe. Then I was</p>

3 (Pages 6 to 9)

Scott Christensen

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10	12
<p>1 put on permanent in March of '04.</p> <p>2 <b>Q</b> Okay. And you've worked continuously</p> <p>3 there since?</p> <p>4 A Yes.</p> <p>5 <b>Q</b> Before Lincoln where did you work?</p> <p>6 A The Natick DPW, water department.</p> <p>7 <b>Q</b> How long did you work there?</p> <p>8 A Just shy of ten years, a month shy of</p> <p>9 ten years.</p> <p>10 <b>Q</b> Okay. And was that your first full-time</p> <p>11 job out of high school?</p> <p>12 A No.</p> <p>13 <b>Q</b> Where else did you work?</p> <p>14 A Perdoni Construction.</p> <p>15 <b>Q</b> How do you spell that?</p> <p>16 A P-E-R-D-O-N-I.</p> <p>17 <b>Q</b> And how long did you work for them?</p> <p>18 A I want to say seven years, I think it</p> <p>19 was.</p> <p>20 <b>Q</b> Okay. So did you start working for them</p> <p>21 before you graduated from high school?</p> <p>22 A Yes.</p> <p>23 <b>Q</b> Yeah, okay.</p> <p>24 All right, so your work history from</p>	<p>1 A Yes.</p> <p>2 <b>Q</b> Do you recognize that document, that</p> <p>3 form document, let's put it that way?</p> <p>4 A Yes.</p> <p>5 <b>Q</b> Okay. What is that?</p> <p>6 A It's a run report.</p> <p>7 <b>Q</b> Okay. And on that run report is there</p> <p>8 any writing on there that's your writing? In</p> <p>9 other words, did you write anything on that</p> <p>10 report?</p> <p>11 A No, my partner did.</p> <p>12 <b>Q</b> And who was that?</p> <p>13 A Dominick Tolson.</p> <p>14 <b>Q</b> Okay. Did you have any role in</p> <p>15 preparing that document? I mean, I'm going to ask</p> <p>16 you about the specifics --</p> <p>17 A Yes.</p> <p>18 <b>Q</b> -- of what happened that day, but I'm</p> <p>19 just talking right now -- my question now just</p> <p>20 relates to the document itself, whether or not you</p> <p>21 assisted him in preparing that or whether he did</p> <p>22 that all on his own.</p> <p>23 A No. When we go to the hospital --</p> <p>24 <b>Q</b> Yeah.</p>
11	13
<p>1 high school on, Perdoni Construction, Natick DPW,</p> <p>2 Lincoln Fire Department?</p> <p>3 A Yeah, pretty....</p> <p>4 <b>Q</b> Is that everything?</p> <p>5 A I believe so.</p> <p>6 <b>Q</b> Okay. And then when did you start</p> <p>7 working here as a -- as a, you know, a non-EMT, do</p> <p>8 you think?</p> <p>9 A I really can't answer that. I don't</p> <p>10 remember that.</p> <p>11 <b>Q</b> Before you started with Lincoln, though?</p> <p>12 A Yes, yes, a couple years before I</p> <p>13 started with Lincoln.</p> <p>14 <b>Q</b> And are you an EMT with Lincoln?</p> <p>15 A Yes. Yeah.</p> <p>16 MR. DURSO: Would you mark this as</p> <p>17 an exhibit, please?</p> <p>18 (Document marked as Exhibit No. 1.)</p> <p>19 (Document exhibited to witness.)</p> <p>20 <b>Q</b> Take a look at that for a minute,</p> <p>21 please, if you would.</p> <p>22 A All right.</p> <p>23 (Witness perusing document.)</p> <p>24 <b>Q</b> Have you had a chance to look at that?</p>	<p>1 A -- the state of Massachusetts requires</p> <p>2 two EMTs to be in back, and usually the EMT that</p> <p>3 write -- does this report is the guy we call the</p> <p>4 tech, it would be the guy in back.</p> <p>5 <b>Q</b> Okay. So Dominick Tolson did that</p> <p>6 report?</p> <p>7 A Yes.</p> <p>8 <b>Q</b> Okay.</p> <p>9 MR. DURSO: Could you mark -- let me</p> <p>10 see if I've got a better copy of that one.</p> <p>11 MR. LEEDBERG: Just for the record,</p> <p>12 Carmen, too, I don't think it matters, but it</p> <p>13 looks like this was cut off or something during</p> <p>14 copying.</p> <p>15 MR. DURSO: I know. I was looking</p> <p>16 for better copies.</p> <p>17 MR. LEEDBERG: I'm sure I have one.</p> <p>18 I can get one to you if that's the best you have.</p> <p>19 MR. DURSO: Here. You know what,</p> <p>20 I've got a better copy. Let me -- it's a little</p> <p>21 darker; that's why I picked that one, though.</p> <p>22 That's the --</p> <p>23 MR. LEEDBERG: Okay. I'm not sure</p> <p>24 it matters, Carmen. I just wanted to point it out</p>

4 (Pages 10 to 13)

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<p>14</p> <p>1 to you.</p> <p>2 MR. DURSO: Yeah. No, well, let's</p> <p>3 do one that's got it all.</p> <p>4 Can we substitute this exhibit --</p> <p>5 MR. LEEDBERG: That's fine.</p> <p>6 MR. DURSO: -- is that okay with</p> <p>7 you?</p> <p>8 MR. LEEDBERG: I have no objection.</p> <p>9 MR. DURSO: Make this a substitute</p> <p>10 exhibit, because we won't have that issue with</p> <p>11 this. And at the same time if you can mark -- I</p> <p>12 think this one's a little clearer than this one.</p> <p>13 So if you can mark this as Exhibit 2, also, okay?</p> <p>14 (Document marked as Exhibit No. 2.)</p> <p>15 Q Could you take a look at Exhibit 2,</p> <p>16 please?</p> <p>17 (Document exhibited to witness.)</p> <p>18 (Witness perusing document.)</p> <p>19 A Yeah.</p> <p>20 Q Okay. What is that form, Exhibit 2?</p> <p>21 A It is an accident report from the</p> <p>22 Sherborn Fire Department.</p> <p>23 Q That's a form you're familiar with?</p> <p>24 A Yes.</p>	<p>16</p> <p>1 A We were in drill that night right</p> <p>2 here --</p> <p>3 Q Yeah.</p> <p>4 A -- in the training drill, department</p> <p>5 drill --</p> <p>6 Q Okay.</p> <p>7 A -- and we got dispatched -- I was on the</p> <p>8 ambulance that night, to start from the beginning.</p> <p>9 I was on the ambulance that night, my duty night.</p> <p>10 Q Okay. And is there a particular call or</p> <p>11 designation for the ambulance?</p> <p>12 A For the -- when it goes out?</p> <p>13 Q Yeah.</p> <p>14 A Any medical or MVA, really. Is that</p> <p>15 what you mean?</p> <p>16 Q I don't know. I've been -- well, what I</p> <p>17 want to know is this what they refer to as A1?</p> <p>18 A That's the ambulance; A1 is the</p> <p>19 ambulance.</p> <p>20 Q Yeah, okay.</p> <p>21 A They call it A1 --</p> <p>22 Q Yeah, all right.</p> <p>23 A -- for short.</p> <p>24 Q Okay. So that's the ambulance that was</p>
<p>15</p> <p>1 Q Okay. Now, does that form contain any</p> <p>2 of your handwriting?</p> <p>3 A Yes, I filled this report out.</p> <p>4 Q Okay. And at the bottom of that form is</p> <p>5 there a -- is there a signature there?</p> <p>6 A Yes.</p> <p>7 Q And is that your signature?</p> <p>8 A Yes.</p> <p>9 Q Okay, great.</p> <p>10 Now, do you remember the particular</p> <p>11 incident that resulted in that form being filled</p> <p>12 out?</p> <p>13 A Yes, we had a problem with the</p> <p>14 stretcher.</p> <p>15 Q Okay. What I'd like you to do, if you</p> <p>16 would, if you could tell me, starting, as best you</p> <p>17 can recall, the beginning of the run that night</p> <p>18 and -- and, you know, what -- what happened as a</p> <p>19 result.</p> <p>20 MR. LEEDBERG: Object as to form.</p> <p>21 and go ahead and answer.</p> <p>22 A All right. Like the whole run, say what</p> <p>23 happened?</p> <p>24 Q Yeah.</p>	<p>17</p> <p>1 involved?</p> <p>2 A Yes.</p> <p>3 Q Is there more than one ambulance here?</p> <p>4 A No.</p> <p>5 Q So A1 --</p> <p>6 A Yeah, A1.</p> <p>7 Q A1 is it. Okay.</p> <p>8 So do you remember what time the</p> <p>9 ambulance went out?</p> <p>10 A The times are on there. I remember --</p> <p>11 Q Okay. From looking at the run sheet,</p> <p>12 can you tell me that?</p> <p>13 A It was about 6:46.</p> <p>14 Q Okay. That's the time that it left</p> <p>15 here, the building we're in here?</p> <p>16 A Yeah.</p> <p>17 MR. LEEDBERG: If you remember,</p> <p>18 Scott.</p> <p>19 A Yeah, I remember it was at night; it was</p> <p>20 a drill night. I believe it was about....</p> <p>21 Q Okay. How often do you have drills?</p> <p>22 A Three times a month I believe it is.</p> <p>23 Q And is it part of your duties to take</p> <p>24 part in those drills?</p>

5 (Pages 14 to 17)



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<p>18</p> <p>1 A Yes.</p> <p>2 Q Are you paid for drills as well as going</p> <p>3 out on runs?</p> <p>4 A Yes.</p> <p>5 Q And is this a situation where you get --</p> <p>6 you get paid for the hours you spend in the</p> <p>7 building as opposed to just the hours that you're</p> <p>8 out on the actual run itself?</p> <p>9 A When you're at the building here --</p> <p>10 Q Yeah.</p> <p>11 A -- waiting for a call.</p> <p>12 Q Yeah.</p> <p>13 A No, you only get paid an hour for that.</p> <p>14 You're on duty from 6:00 at night till six in the</p> <p>15 morning.</p> <p>16 Q Yeah.</p> <p>17 A It works out to be -- they've changed</p> <p>18 it. I think it's back to every sixth day -- every</p> <p>19 sixth night, and you're just paid an hour for that</p> <p>20 night to be on duty --</p> <p>21 Q Yeah.</p> <p>22 A -- and then you're paid when you go out</p> <p>23 for the call.</p> <p>24 Q For the actual time out?</p>	<p>20</p> <p>1 Q Okay.</p> <p>2 A -- maybe a hundred yards, 200 yards.</p> <p>3 Q Okay. So it says you got there at 6:47.</p> <p>4 So, I mean, you're there almost immediately?</p> <p>5 A Yeah, you sign off and sign on pretty</p> <p>6 much.</p> <p>7 Q Okay. And when you got there, what did</p> <p>8 you see?</p> <p>9 A We didn't see anything at first. We</p> <p>10 pulled up in front of the building, I believe. We</p> <p>11 kind of pulled around the back looking for the</p> <p>12 pedestrian, because usually when you're dispatched</p> <p>13 for an incident, there's usually a lot of</p> <p>14 commotion and it's usually pretty easy to see. So</p> <p>15 we didn't see anything at first. I believe police</p> <p>16 were on scene, and we were met by the gentleman</p> <p>17 that was very, very agitated, and he was sort of</p> <p>18 limping.</p> <p>19 Q Okay. If I tell you his name was</p> <p>20 Mr. Koran, would --</p> <p>21 A Yeah, Mr. Koran, however you pronounce</p> <p>22 it, Koran.</p> <p>23 Q Yeah.</p> <p>24 A And he stated that someone had ran over</p>
<p>19</p> <p>1 A Yes, there's a two-hour for the</p> <p>2 transport --</p> <p>3 Q Okay.</p> <p>4 A -- you get a minimum of two hours.</p> <p>5 Q All right. Okay, so this is done in</p> <p>6 military time --</p> <p>7 A Yes.</p> <p>8 Q -- 1846, and that's 6:46?</p> <p>9 A Yes.</p> <p>10 Q Okay. And where did you go from here?</p> <p>11 A We got dispatched from here for a</p> <p>12 pedestrian versus motor vehicle at the Sherborn</p> <p>13 Inn.</p> <p>14 Q Okay. And where's the Sherborn Inn from</p> <p>15 here?</p> <p>16 A It is right over here. (Indicating.)</p> <p>17 If you went out of here --</p> <p>18 Q You're -- I've got to stop you, because,</p> <p>19 for the deposition, you're pointing.</p> <p>20 A Oh, sorry.</p> <p>21 Q And as you go out the front of the</p> <p>22 building --</p> <p>23 A You take a right and it's a quarter mile</p> <p>24 down, not even, on your left --</p>	<p>21</p> <p>1 his foot and then had left the scene.</p> <p>2 Q Okay. Where was he at that point when</p> <p>3 you first saw him?</p> <p>4 A I believe on the side of the -- in the</p> <p>5 parking lot.</p> <p>6 Q Okay. What were the weather conditions</p> <p>7 at that time, do you recall?</p> <p>8 A I remember it was a cool night, and it</p> <p>9 was dry, I know that.</p> <p>10 Q Was there snow on the ground?</p> <p>11 A No, I don't believe so. If there was,</p> <p>12 there wasn't on the roads.</p> <p>13 Q Okay. And did he have a motor vehicle?</p> <p>14 A Yes.</p> <p>15 Q And do you know where the motor vehicle</p> <p>16 was?</p> <p>17 A No.</p> <p>18 Q And how did you know he had a motor</p> <p>19 vehicle?</p> <p>20 A He said he was meeting some people</p> <p>21 there.</p> <p>22 Q Okay. And can you give me a landmark in</p> <p>23 terms of where he was when you first saw him?</p> <p>24 A First saw him, he was -- it's hard to</p>

6 (Pages 18 to 21)

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22

24

1 describe. There's kind of a parking lot in front,  
2 and then there's a row of hedges, then there's the  
3 parking for the -- it's like a little road that  
4 runs actually around the back and we found him  
5 there.

6 **Q Okay. Out in back of the inn?**

7 **A To the side.**

8 **Q To the side. Which side, right or the**  
9 **left?**

10 **A Well, actually, I think it would be the**  
11 **-- it would be the front entrance. It's kind of**  
12 **set up funny. There's an entrance to the -- the**  
13 **restaurant side, and there's an actual front along**  
14 **the road.**

15 **Q Okay. But in terms of the front of the**  
16 **building, more to the right or more to the left?**

17 **A It would be to the left, yeah, the front**  
18 **entrance now for the public for the restaurant.**

19 **Q Has it changed since --**

20 **A No. No, it has not.**

21 **Q Okay. Is there more than one entrance**  
22 **into the -- into the inn?**

23 **A I know of two.**

24 **Q Okay. Is there a -- is there an exit**

1 **A Yeah. What it is, is there's a road**  
2 **that goes in that it's an actual town road, it**  
3 **accesses to land in the back, and their road kind**  
4 **of comes in along the building, and there's**  
5 **parking here, a row of shrubs, and it comes out**  
6 **here, and you can park over here, across the other**  
7 **side of the street. (Indicating.)**

8 **Q Okay. So which part is -- where is the**  
9 **one way?**

10 **A Right along the building. I believe --**  
11 **I believe it's one way.**

12 **Q So if you're coming from the right, the**  
13 **immediate entrance is the first road you come to?**

14 **A You take the left, I forget the name of**  
15 **the street, and you take a right into their little**  
16 **road -- driveway --**

17 **Q Yeah.**

18 **A -- that goes by the front entrance.**

19 **Q Yeah. And then does the one way come**  
20 **out on the other side?**

21 **A It comes out on that street that you**  
22 **make the left onto.**

23 **Q Okay. Do you think you could draw that?**

24 **A Yeah.**

23

25

1 **that's an exit only?**

2 **A I can't answer that. I haven't been**  
3 **there in a while.**

4 **Q Okay. I've been given the impression**  
5 **that there's a -- there's a one way there at some**  
6 **point. Is there? Would you know that?**

7 **MR. LEEDBERG: Objection as to form.**  
8 **Go ahead and answer if you can, Scott.**

9 **A For the parking lot itself?**

10 **Q I don't know. For the entranceway to**  
11 **the inn.**

12 **A For the traffic?**

13 **Q Yeah.**

14 **A Yeah, I believe so.**

15 **Q Okay. And looking at the inn from the**  
16 **road, would that be to the right or to the left?**

17 **A To the right. You go in, it's sort of**  
18 **like a horseshoe that goes around the front of the**  
19 **building --**

20 **Q Yeah.**

21 **A -- and there's like six, seven parking**  
22 **spots in front there, mostly handicap, I believe.**

23 **Q Okay. So to get in there -- you said**  
24 **it's like a horseshoe?**

1 **MR. LEEDBERG: I have no objection.**

2 **A I don't care. Yeah.**

3 **Q Maybe it will help us to understand.**

4 **A All right. I'm not really good at**  
5 **drawing here.**

6 **Q That's okay, just to get some sense of**  
7 **what's going on.**

8 **A Similar to that. This would be the**  
9 **shrubs here, there's parking here. (Indicating.)**

10 **Q Yeah. Is this Route 27 out here?**  
11 **(Indicating.)**

12 **A I forget -- Route 27 would be right**  
13 **here. (Indicating.)**

14 **Q Okay.**

15 **A The inn is sort of -- sort of looks like**  
16 **-- like that, something sort of like that. I**  
17 **think. (Indicating.)**

18 **Q That's the building?**

19 **A That would be -- this would be the end,**  
20 **I think. (Indicating.)**

21 **Q Okay. Could you just put B-L-D-G on**  
22 **that?**

23 **A B-L-G, all right.**

24 **Q B-L-D-G, yeah.**

7 (Pages 22 to 25)

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<p style="text-align: right;">26</p> <p>1 MR. LEEDBERG: Why don't you mark</p> <p>2 Route 27, too, Scott, please.</p> <p>3 A Excuse my drawing.</p> <p>4 Q Yeah. And just put a B at the beginning</p> <p>5 of that, B?</p> <p>6 A Right here? (Indicating.)</p> <p>7 Q Yeah. That's good. Great.</p> <p>8 So that's the building. This is</p> <p>9 Route 27?</p> <p>10 A This would be 27.</p> <p>11 Q And what's this over here?</p> <p>12 (Indicating.)</p> <p>13 A This would be the street.</p> <p>14 Q Do you know the name of the street?</p> <p>15 A I have no idea.</p> <p>16 Q Okay. What's this? (Indicating.)</p> <p>17 A This would be trees. (Indicating.)</p> <p>18 Q Okay. Can you put trees? (Indicating.)</p> <p>19 A Yeah. (Witness complied.)</p> <p>20 Q Okay. Now, are you able to say</p> <p>21 approximately where it was you saw Mr. Koran when</p> <p>22 you first saw him?</p> <p>23 A I believe the ambulance was parked right</p> <p>24 about here, facing out, the street. (Indicating.)</p>	<p style="text-align: right;">28</p> <p>1 A (Witness complied.)</p> <p>2 Q Great. Okay.</p> <p>3 And you did not see his car; is that</p> <p>4 right?</p> <p>5 A No, he stated that he was meeting</p> <p>6 somebody there for dinner, I believe it was.</p> <p>7 Q Okay.</p> <p>8 A That's what brought him to the Sherborn</p> <p>9 Inn.</p> <p>10 Q Okay. Great. Could you just put your</p> <p>11 initials over here? (Indicating.)</p> <p>12 A Right here? (Indicating.)</p> <p>13 Q Yeah. And just put today 's date, which</p> <p>14 is 9/19/06.</p> <p>15 A (Witness complied.)</p> <p>16 Q Great.</p> <p>17 MR. DURSO: And can you mark that as</p> <p>18 the next exhibit for us, please?</p> <p>19 (Document marked as Exhibit No. 3.)</p> <p>20 Q Okay, so I'm going to leave this here --</p> <p>21 A Yeah.</p> <p>22 Q -- so you can orient, if necessary.</p> <p>23 I'll leave it here with you.</p> <p>24 So you arrive at the scene --</p>
<p style="text-align: right;">27</p> <p>1 Q Okay. Can you put a little -- a little</p> <p>2 rectangle with a V in the direction it's pointed?</p> <p>3 A A triangle? Oh, I know what you mean,</p> <p>4 like a car, like they do in the --</p> <p>5 Q Like that. (Indicating.)</p> <p>6 A Yeah, that's what I thought, yeah, in</p> <p>7 the accident reports.</p> <p>8 (Witness complied.)</p> <p>9 Q Just put an "A" inside that for</p> <p>10 ambulance?</p> <p>11 A (Witness complied.)</p> <p>12 Q Great. Okay.</p> <p>13 And where was Mr. Koran?</p> <p>14 A I believe he was walking right around in</p> <p>15 here, in back of the ambulance, if I'm correct.</p> <p>16 (Indicating.)</p> <p>17 Q Okay. Would you put a "K" to indicate</p> <p>18 where he was?</p> <p>19 A I'm not quite sure. I just remember him</p> <p>20 being in the back, walking around very agitated.</p> <p>21 Q All right. Can you do like a little</p> <p>22 circle in the area where he was walking?</p> <p>23 A Like in here. (Indicating.)</p> <p>24 Q Okay. And put a "K" inside that.</p>	<p style="text-align: right;">29</p> <p>1 A Um-hm.</p> <p>2 Q -- you and Dominick Tolson?</p> <p>3 A And Ron Buckler was with us, I believe.</p> <p>4 Q So three of you?</p> <p>5 A Yes.</p> <p>6 Q Okay. How come three of you?</p> <p>7 A On the duty nights some crews have</p> <p>8 three, some have four.</p> <p>9 Q Ron Buckler is, what, deputy chief?</p> <p>10 A Was deputy at the time.</p> <p>11 Q What is he now?</p> <p>12 A I think just a fire fighter.</p> <p>13 Q Okay. So Ron Buckler, you, and Dominick</p> <p>14 Tolson?</p> <p>15 A Correct.</p> <p>16 Q Is there a -- is there an order to this?</p> <p>17 Because Ron Buckler was a deputy chief, is he sort</p> <p>18 of in charge?</p> <p>19 A Yeah, he would be -- he would be at the</p> <p>20 time. I don't believe -- I don't know if he still</p> <p>21 is. He was an intermediate, which is the I level,</p> <p>22 too.</p> <p>23 Q Okay. For an EMT you mean?</p> <p>24 A Yes, he was an EMT I.</p>

8 (Pages 26 to 29)

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30

32

1 Q Okay. So he was certified at a higher  
2 level?  
3 A Never mind -- yes, the medical.  
4 Q That would be the primary consideration  
5 in terms of who would take charge at a scene; is  
6 that it?  
7 A It all -- it has -- deputy, yeah, too,  
8 and he was an I.  
9 Q Okay. All right. So there were the  
10 three of you there?  
11 A Um-hm.  
12 Q And when you get there, what happens?  
13 A We find Mr. Kor....  
14 Q Koran.  
15 A Koran. Police were on -- I can't  
16 remember if they were on scene or we all arrived  
17 together. And he was very, very agitated. He  
18 just cared more about the lady that took off that  
19 ran over his foot.  
20 Q Okay.  
21 A He was really agitated about that. I  
22 can't remember -- one of the -- I think it was Ron  
23 Downing at the time, he's really level-headed,  
24 calmed -- I mean Ron Buckler, I apologize.

31

33

1 Q Yeah.  
2 A He's very good with people, very calm  
3 person, and he finally brought him in back of the  
4 ambulance and calmed him down.  
5 Q Okay. And then what happened?  
6 A We asked what happened once he was  
7 calmed down, and he said the lady had ran over his  
8 foot and she had taken off.  
9 Q Okay. And what did you guys do then?  
10 A Looked at his foot.  
11 Q On the scene?  
12 A In back of the ambulance, yes.  
13 Q How do you do that? I mean --  
14 A Remove the person's sock -- well, shoe  
15 and sock.  
16 Q Put him inside or do you do it --  
17 A Yes.  
18 THE STENOGRAPHER: Wait. I'm sorry.  
19 You have to talk one at a time.  
20 MR. LEEDBERG: I don't think we ever  
21 went over the ground rules with Scott. You want  
22 to do that real quick? It might avoid some  
23 problems.  
24 Q This young lady takes down --

1 A Yes, I see that.  
2 Q -- every word we say, and when she gets  
3 all done, she's gonna have a transcript. You  
4 won't believe how she's captured everything that  
5 we say. The problem is she can only take it down.  
6 A As one person speaks.  
7 Q Yeah. So it's really important that you  
8 wait for me to stop before you start, and me too,  
9 that I wait for you to stop before I start --  
10 A All right.  
11 Q -- otherwise it's going to be garbled.  
12 Okay?  
13 So, I'm sorry, what was I asking  
14 you?  
15 A The --  
16 Q Yeah, about getting him in the vehicle.  
17 A Yes. Most -- that type of situation, it  
18 depends, it looked very minor, we figured we'd put  
19 him in back of the ambulance --  
20 Q Yeah?  
21 A -- instead of doing it outside, do  
22 the -- you know, it was a cold night --  
23 Q Yeah.  
24 A -- and to calm him down and get him

1 inside and out of the public view --  
2 Q All right.  
3 A -- give him a little more privacy.  
4 Q Who did that?  
5 A I believe it was Ron Downing -- I mean  
6 Ron Buckler. I'm sorry, I keep saying that. We  
7 have a Ron Downing here too, so I always get the  
8 two of them mixed up.  
9 Q You're sure it was Ron Buckler that  
10 was --  
11 A Oh, yeah. Yes.  
12 Q Are the names of the people who were on  
13 the scene on this run sheet?  
14 A No --  
15 Q Okay.  
16 A -- I don't believe so.  
17 Q And why is that?  
18 A This is the -- this is the run report  
19 for the state that you've got to leave -- every  
20 ambulance in the state of Massachusetts has to  
21 leave what they call a trip report, run report.  
22 Q Yeah.  
23 A He was on the call, but he wasn't on the  
24 transport, so that's why his name is not on the

9 (Pages 30 to 33)



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<p style="text-align: right;">34</p> <p>1 trip report. It's only who was on the ambulance.</p> <p>2 <b>Q Okay. Is there another document</b></p> <p>3 <b>generated that has the information about who's</b></p> <p>4 <b>there?</b></p> <p>5 A There is. I don't know where that is.</p> <p>6 We have a -- a check-off sheet, I think that's</p> <p>7 what they call it. It has everybody's names and</p> <p>8 they check off who was at the call so they get</p> <p>9 paid.</p> <p>10 <b>Q Okay. And is that produced for every</b></p> <p>11 <b>trip or for every day?</b></p> <p>12 A For every trip, incident, I should say.</p> <p>13 It checks off everybody that shows up at the</p> <p>14 scene.</p> <p>15 <b>Q Okay. All right. And you're sure it</b></p> <p>16 <b>was Ron Buckler and not this other Ron that was</b></p> <p>17 <b>with you?</b></p> <p>18 A Yes.</p> <p>19 <b>Q Okay. All right. So who actually did</b></p> <p>20 <b>the examination, if any, of Mr. Koran?</b></p> <p>21 A I believe Dominick and Mr. Buckler.</p> <p>22 <b>Q Okay. You did not physically -- well,</b></p> <p>23 <b>first of all, did it involve taking off his shoe?</b></p> <p>24 A Yes.</p>	<p style="text-align: right;">36</p> <p>1 <b>observe about the injury?</b></p> <p>2 A I can't recall it was so long ago.</p> <p>3 <b>Q Do you remember hearing the other EMTs</b></p> <p>4 <b>say anything about the injury.</b></p> <p>5 A It was minor, because that's one of the</p> <p>6 reasons Mr. Buckler didn't transport with us,</p> <p>7 because it wasn't going to be an ALS run.</p> <p>8 <b>Q Didn't transport with you?</b></p> <p>9 A Yes. On BLS transports --</p> <p>10 <b>Q Yeah.</b></p> <p>11 A -- usually you don't -- if you don't</p> <p>12 need ALS, they don't come, they don't ride along</p> <p>13 with you to the hospital.</p> <p>14 <b>Q How did he get there?</b></p> <p>15 A He went in the ambulance with us.</p> <p>16 <b>Q Okay. But how did he leave the scene?</b></p> <p>17 A I do not know. Probably walked back</p> <p>18 because it's a hundred, 200 yards down the street.</p> <p>19 <b>Q Okay. So he didn't go to the hospital</b></p> <p>20 <b>with you?</b></p> <p>21 A No.</p> <p>22 <b>Q All right. What care was -- if any, was</b></p> <p>23 <b>rendered at the scene to Mr. Koran before he went</b></p> <p>24 <b>to the hospital?</b></p>
<p style="text-align: right;">35</p> <p>1 <b>Q All right. Were you involved with any</b></p> <p>2 <b>of that physical hands on care?</b></p> <p>3 A No, I was in the doorway for a lot of</p> <p>4 the time --</p> <p>5 <b>Q Okay.</b></p> <p>6 A -- of the ambulance, the side door.</p> <p>7 <b>Q Yeah.</b></p> <p>8 A I drove the ambulance over there I</p> <p>9 believe. I know I drove it to the hospital. I</p> <p>10 believe I drove it to the scene.</p> <p>11 <b>Q Okay. So do you remember what care was</b></p> <p>12 <b>given to Mr. Koran for his foot, what -- what the</b></p> <p>13 <b>others did?</b></p> <p>14 A They removed his shoe and sock and</p> <p>15 examined his foot.</p> <p>16 <b>Q Okay. And did you hear them say</b></p> <p>17 <b>anything as to what they observed or did you</b></p> <p>18 <b>observe anything about his foot yourself?</b></p> <p>19 A I don't remember. I remember he was</p> <p>20 hesitant about going to the hospital at the time.</p> <p>21 Mr. Koran.</p> <p>22 <b>Q Okay. Did he say why?</b></p> <p>23 A It was a minor injury.</p> <p>24 <b>Q Okay. And what, if anything, did you</b></p>	<p style="text-align: right;">37</p> <p>1 A His shoe was removed, the sock, they</p> <p>2 examined the foot. If I'm correct, I don't</p> <p>3 remember seeing any bruising at the time. They</p> <p>4 applied ice. We put him in the stretcher, took a</p> <p>5 set of vitals.</p> <p>6 <b>Q Okay. Was his foot wrapped?</b></p> <p>7 A Yes -- not wrapped, but the ice was on</p> <p>8 it and wrapped, I believe.</p> <p>9 <b>Q So do you have to put a wrap around to</b></p> <p>10 <b>hold the ice in place?</b></p> <p>11 A Yes. That was -- it was more or less on</p> <p>12 there I believe to keep the icepack, and he was</p> <p>13 really agitated, I remember that.</p> <p>14 <b>Q Okay.</b></p> <p>15 A Because I was in the doorway with the</p> <p>16 police at the time, and I remember them saying the</p> <p>17 lady was all shaken up at the PD, because she had</p> <p>18 drove to the police station, and she was really,</p> <p>19 really -- I remember that. being scared, because I</p> <p>20 was in the doorway with one of the police officers</p> <p>21 at the time.</p> <p>22 <b>Q Okay.</b></p> <p>23 A Because he was very, very agitated. And</p> <p>24 then -- because when we were packing, I remember</p>

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1 him saying he was going to therapy for anger  
2 management, and his counselor wouldn't like it or  
3 would be upset or something like that. I remember  
4 him saying he was going to anger management.  
5 Because he was very -- very agitated at the scene.

6 But, like I said, Ron Downing after  
7 a while calmed him down. And after inspecting the  
8 foot, he decided to go. Because he was real  
9 hesitant about going because he was worried about  
10 his car, he was out of state, and they finally  
11 convinced him to go.

12 **Q Okay. So once it was determined that he**  
13 **would go to the hospital -- where was he gonna go**  
14 **by the way?**

15 A It all depends on the type of incident,  
16 really. Like on a call like this with what we  
17 call a BLS transport, most likely Framingham or  
18 Natick, patient's choice, but where he's from out  
19 of state, we took him to the closest.

20 **Q What's BLS mean?**

21 A Basic life support.

22 **Q Okay. As opposed to ALS?**

23 A Yes.

24 **Q Which is what?**

39

41

1 A Advanced life support.

2 **Q I'm sorry, you took him to the closest**  
3 **place, which was where?**

4 A MetroWest Natick.

5 **Q Okay. And in order to transport him,**  
6 **what did you do?**

7 A You place the patient in the stretcher.

8 **Q Yeah.**

9 A You've got to apply -- I should  
10 remember. It's like -- I mean, I do it so much --  
11 I believe it's four straps. They have shoulder

12 straps that come over the shoulders to keep the  
13 patient in the ambulance if you're involved in a  
14 motor vehicle accident. You put all the straps  
15 on, make the patient comfortable, and then  
16 initiate the transport.

17 **Q Okay. Who did that?**

18 A Dominick, I believe. I could have  
19 helped out. I usually do if I'm -- while the other  
20 guys do their inspection of the injury and doing  
21 vitals. usually to speed the process up. It was  
22 so long ago. I don't remember. But it's also --  
23 just so you know it's also a state law, it's  
24 mandated by us, to fully secure the patient with

1 all those straps.

2 **Q Is the stretcher itself placed in a**  
3 **particular position in the ambulance?**

4 A Pretty much into the middle of the back  
5 of the ambulance, and it has a lock that locks  
6 the stretcher actually in place.

7 **Q Locks it to the ambulance floor?**

8 A Correct. There's a lever that locks it,  
9 and the front wheels are cradled in a type of --  
10 it's to hold 'em from going from side to side.  
11 It's not really a -- it doesn't physically lock  
12 it, but it keeps it from going from side to side.

13 **Q Okay. Does it have a groove or**  
14 **something?**

15 A Yes.

16 **Q All right. And then on the -- the**  
17 **stretcher itself, what is -- what was Mr. Koran's**  
18 **position on the stretcher?**

19 A He was in the sitting position.

20 **Q Okay. So the stretcher can be adjusted**  
21 **so the person can sit up?**

22 A Yes, you can have it so the feet are  
23 elevated, you can have it so the head is elevated  
24 up so he can be in the sitting position.

1 **Q Okay. And do you recall his position?**

2 A He was sitting up.

3 **Q All right. He's -- he's sitting up so**  
4 **that he's bent from the -- from the hips upward?**

5 A Yes.

6 **Q Is he entirely in a vertical position or**  
7 **is he back or....**

8 A I don't know how far up it was. It was  
9 up, though.

10 **Q Okay. And how about his legs?**

11 A They were laying flat.

12 **Q Horizontal?**

13 A Horizontal, yes.

14 **Q Not -- not elevated?**

15 A Not that I believe.

16 **Q Okay. And were both of his feet on the**  
17 **stretcher?**

18 A Yes.

19 **Q Okay. All right. And then in addition**  
20 **to that, you say he has a number of straps to hold**  
21 **him in position on the stretcher itself?**

22 A Yes.

23 **Q How many stretchers are there in the --**  
24 **in the A1 ambulance?**

11 (Pages 38 to 41)

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<p style="text-align: right;">42</p> <p>1 A There are just one.</p> <p>2 <b>Q Okay. And is that a -- a piece of</b></p> <p>3 <b>equipment you're familiar with?</b></p> <p>4 A Yes.</p> <p>5 <b>Q Something you use all the time?</b></p> <p>6 A Yes.</p> <p>7 <b>Q And was the -- you went to the hospital?</b></p> <p>8 A Correct. I drove.</p> <p>9 <b>Q Okay. So you and Mr. Tolson are the</b></p> <p>10 <b>only two people with Mr. Koran in the ambulance at</b></p> <p>11 <b>that time when you're going to the hospital; is</b></p> <p>12 <b>that right?</b></p> <p>13 A Correct.</p> <p>14 <b>Q So you go to the hospital, and what's</b></p> <p>15 <b>the procedure at the hospital?</b></p> <p>16 MR. LEEDBERG: Object as to form.</p> <p>17 Go ahead and answer if you can.</p> <p>18 A There's -- what was the --</p> <p>19 <b>Q What's the procedure --</b></p> <p>20 A Oh, the procedure, sorry.</p> <p>21 <b>Q -- when you get there.</b></p> <p>22 A We go up -- we get to the hospital. It</p> <p>23 really depends, most of the time the driver will</p> <p>24 take the stretcher out of the ambulance. There's</p>	<p style="text-align: right;">44</p> <p>1 what you do is you call on CMED, the hospital, and</p> <p>2 you give a quick patient narrative, what you're</p> <p>3 bringing in, patient's age, sex, mechanism of</p> <p>4 injury, illness. And after that, they either give</p> <p>5 you a room assignment or they'll say just -- you</p> <p>6 know, you get the room assignment upon arrival.</p> <p>7 So you get to the hospital. We take</p> <p>8 the patient out. Up at Leonard Morse, you have</p> <p>9 one, two, three doors to get into the emergency</p> <p>10 room, all automatic, they have the sensor and you</p> <p>11 just walk through one, they open and close behind</p> <p>12 you.</p> <p>13 Then you get into the ER, and</p> <p>14 usually you're met by a nurse, or sometimes</p> <p>15 they're real busy you've got to find the nurse,</p> <p>16 and then they see who you're with, and then you</p> <p>17 just give them another quick what you have, if</p> <p>18 there's any patient change, the status of the</p> <p>19 patient. Just in case it, you know, changes, you</p> <p>20 can upgrade the room or....</p> <p>21 <b>Q Okay. In terms of the usual</b></p> <p>22 <b>procedure --</b></p> <p>23 A Um-hm.</p> <p>24 <b>Q -- when you come in like that, does one</b></p>
<p style="text-align: right;">43</p> <p>1 really no procedure, either one of us can do it.</p> <p>2 <b>Q You mean just the driver?</b></p> <p>3 A Yes.</p> <p>4 <b>Q Just one person?</b></p> <p>5 A Yes.</p> <p>6 <b>Q Okay. Why is that?</b></p> <p>7 A It's just the way we do things,</p> <p>8 procedure, because usually the tech's in back of</p> <p>9 the ambulance. Sometimes the tech takes it out.</p> <p>10 It's just the way the -- it depends on the</p> <p>11 situation, who's out of the ambulance first, who</p> <p>12 gets to the stretcher first. There's really no</p> <p>13 procedure that the driver does this and the tech</p> <p>14 does that when you get to the hospital.</p> <p>15 <b>Q Okay. Besides taking the ambulance --</b></p> <p>16 <b>besides taking the stretcher out of the ambulance,</b></p> <p>17 <b>rather, what else is there that has to be done</b></p> <p>18 <b>immediately when you get to the hospital? Does</b></p> <p>19 <b>somebody have to go into the hospital and open</b></p> <p>20 <b>doors or something or --</b></p> <p>21 A The way it works is, on the way to the</p> <p>22 hospital --</p> <p>23 <b>Q Yeah.</b></p> <p>24 A -- we have a channel called CMED, and</p>	<p style="text-align: right;">45</p> <p>1 <b>person take the -- the patient in and does the</b></p> <p>2 <b>other person on the vehicle stay with the vehicle?</b></p> <p>3 A No, you leave the vehicle. Both -- you</p> <p>4 need two people to bring a stretcher in to keep it</p> <p>5 controlled so it doesn't slide all over the place.</p> <p>6 <b>Q Okay. All right. So now going back to</b></p> <p>7 <b>Mr. Koran --</b></p> <p>8 A Um-hm.</p> <p>9 <b>Q -- you arrive there. It says you left</b></p> <p>10 <b>-- it says scene departure time. That means you</b></p> <p>11 <b>left the inn at 7:08; is that right?</b></p> <p>12 A I left the....</p> <p>13 <b>Q I see --</b></p> <p>14 MR. LEEDBERG: I'll object. If you</p> <p>15 remember, Scott. I mean the document --</p> <p>16 <b>Q I see 1908. Is that right?</b></p> <p>17 MR. LEEDBERG: The document is what</p> <p>18 it is, but, I mean, if you remember.</p> <p>19 A No, I don't remember. Whatever the</p> <p>20 document -- the times. I -- whatever --</p> <p>21 <b>Q Okay. And according to what's indicated</b></p> <p>22 <b>there, that would be 7:08; is that correct?</b></p> <p>23 A We left -- scene departure?</p> <p>24 <b>Q Yeah.</b></p>

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<p style="text-align: right;">46</p> <p>1 A 7:08, yes.</p> <p>2 <b>Q Okay. All right. And then the -- it</b></p> <p>3 <b>looks like -- I can't tell if it's 1950 or 1956,</b></p> <p>4 <b>but that would be 7:50 or 7:56 that you arrived</b></p> <p>5 <b>there?</b></p> <p>6 A No, that's probably a problem with the</p> <p>7 dispatch times.</p> <p>8 <b>Q What's that mean?</b></p> <p>9 A I don't know how to --</p> <p>10 MR. LEEDBERG: Go ahead and explain</p> <p>11 it.</p> <p>12 A That's way too long of a transport;</p> <p>13 that's about 40 minutes.</p> <p>14 <b>Q Okay. That's what I was going to ask</b></p> <p>15 <b>you, yeah.</b></p> <p>16 A That's about a 40-minute transport.</p> <p>17 That would --</p> <p>18 <b>Q How long does it actually take, about?</b></p> <p>19 A That time of night, ten minutes, eight</p> <p>20 minutes, ten minutes from here.</p> <p>21 <b>Q Okay. Do you have a recollection as to</b></p> <p>22 <b>-- you drove, you said, right?</b></p> <p>23 A Yes, correct.</p> <p>24 <b>Q Do you have a recollection as to how</b></p>	<p style="text-align: right;">48</p> <p>1 A For that --</p> <p>2 <b>Q -- for that 20-odd minutes?</b></p> <p>3 A For that type of call, yes. Because.</p> <p>4 like I stated, he was very agitated --</p> <p>5 <b>Q Yeah.</b></p> <p>6 A -- it took a lot of calming down, and he</p> <p>7 was very -- I remember him being very, very</p> <p>8 indecisive about going, and doing what we call a</p> <p>9 patient refusal --</p> <p>10 <b>Q Yeah.</b></p> <p>11 A -- which is he refused to be transported</p> <p>12 to the hospital. He was back and forth on that.</p> <p>13 <b>Q Okay. So the -- the question would be</b></p> <p>14 <b>about the hospital arrival time then I take it; is</b></p> <p>15 <b>that right?</b></p> <p>16 A Yes, that's a -- that's a glitch. We</p> <p>17 have problems with dispatch. They have a lot of</p> <p>18 dispatchers -- one dispatcher up there. Sometimes</p> <p>19 the times get like this, messed up.</p> <p>20 <b>Q Okay. Well, in any event, you get</b></p> <p>21 <b>there, and your recollection is, what, that you</b></p> <p>22 <b>took Mr. Koran out of the --</b></p> <p>23 A I did take him out of the back.</p> <p>24 <b>Q Okay. And what did you do to do that,</b></p>
<p style="text-align: right;">47</p> <p>1 <b>long it took you to get there that night?</b></p> <p>2 A Average. I don't remember anything</p> <p>3 unusual, like, you know, traffic or any type of</p> <p>4 delay.</p> <p>5 <b>Q No weather problems?</b></p> <p>6 A No weather problems; it was a dry night.</p> <p>7 <b>Q Okay. In terms of your memory, assuming</b></p> <p>8 <b>that the on scene time is correct, which appears</b></p> <p>9 <b>to be 6:47; is that right?</b></p> <p>10 A I believe so, yeah. I mean, it was so</p> <p>11 long ago.</p> <p>12 <b>Q Oh, sure. But I mean assuming that</b></p> <p>13 <b>that's correct --</b></p> <p>14 A Yes.</p> <p>15 <b>Q -- would the departure time of 7:08 be</b></p> <p>16 <b>approximately correct that you would have been on</b></p> <p>17 <b>the scene?</b></p> <p>18 A Yeah. I know we were on scene a while,</p> <p>19 I remember that.</p> <p>20 <b>Q Okay.</b></p> <p>21 A That, I remember.</p> <p>22 <b>Q But, I mean, does that -- does that seem</b></p> <p>23 <b>like the right amount of time to you that you</b></p> <p>24 <b>would have been there for --</b></p>	<p style="text-align: right;">49</p> <p>1 <b>do you -- do you start from the outside of the</b></p> <p>2 <b>rear or do you go into the -- are you able to go</b></p> <p>3 <b>from your driver's seat into the back or do you</b></p> <p>4 <b>have to go around?</b></p> <p>5 A There's a little doorway there, but, no,</p> <p>6 you'd never do that.</p> <p>7 <b>Q Okay.</b></p> <p>8 A You put the truck in park, set the</p> <p>9 emergency brake, go around to the back, open the</p> <p>10 doors, usually grab a set of gloves, Latex gloves.</p> <p>11 and then you fold your -- the rear bumper folds</p> <p>12 up, which you have to fold up.</p> <p>13 <b>Q Okay.</b></p> <p>14 A And then just -- you unlock the</p> <p>15 stretcher from the box or the ambulance.</p> <p>16 <b>Q And how do you do that?</b></p> <p>17 A You just push it.</p> <p>18 <b>Q Push what?</b></p> <p>19 A There's a bar that runs along the</p> <p>20 left-hand side of the stretcher. It's a lock that</p> <p>21 -- that holds the stretcher to the ambulance</p> <p>22 floor.</p> <p>23 <b>Q Okay. So that lever -- that's a lever</b></p> <p>24 <b>that's on the stretcher itself?</b></p>

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<p style="text-align: right;">50</p> <p>1 A No, it's on the floor, it mounts to the</p> <p>2 floor.</p> <p>3 Q It's part of the ambulance?</p> <p>4 A Yes, it's part of the ambulance.</p> <p>5 Q Okay. And that controls whether the</p> <p>6 stretcher is locked to the vehicle or not?</p> <p>7 A Yes.</p> <p>8 Q Okay. All right. So you unlock that in</p> <p>9 order to take it out?</p> <p>10 A Yeah. It makes a click when you push</p> <p>11 it.</p> <p>12 Q Okay. And what happens next?</p> <p>13 A You pull the stretcher out.</p> <p>14 Q Yeah. What happens when you pull the</p> <p>15 stretcher out?</p> <p>16 A The wheels drop down.</p> <p>17 Q Okay. And the wheels drop down to the</p> <p>18 ground?</p> <p>19 A Correct.</p> <p>20 Q And that's because the ground is at a</p> <p>21 different level --</p> <p>22 A Yes.</p> <p>23 Q -- from the back of the ambulance; is</p> <p>24 that right?</p>	<p style="text-align: right;">52</p> <p>1 A Yeah, about probably there.</p> <p>2 Q Okay. Good. Thank you.</p> <p>3 A Yeah.</p> <p>4 Q Okay. And what is the mechanism by</p> <p>5 which the wheels come down when you --</p> <p>6 MR. LEEDBERG: Objection as to form.</p> <p>7 Go ahead and answer if you can.</p> <p>8 A All right, you pull the stretcher out,</p> <p>9 you hold it up slightly to let the wheels swing</p> <p>10 down so you can hear it click.</p> <p>11 Q Okay. But how do they fall; is it by</p> <p>12 gravity or do you --</p> <p>13 A Yes.</p> <p>14 Q -- pull a lever or --</p> <p>15 A By gravity.</p> <p>16 Q Okay. So the wheels, before they come</p> <p>17 out of the ambulance, are they on the floor of the</p> <p>18 ambulance?</p> <p>19 A Yes, they scissor up.</p> <p>20 Q Yeah.</p> <p>21 A Then when you pull it out, they scissor</p> <p>22 down --</p> <p>23 Q Okay.</p> <p>24 A -- and they click.</p>
<p style="text-align: right;">51</p> <p>1 A Yes. What you do is, you pull out --</p> <p>2 Q How high is the back of the ambulance?</p> <p>3 A I don't know.</p> <p>4 Q In terms of -- would you mind standing</p> <p>5 up for a second?</p> <p>6 A Yeah. (Witness complied.)</p> <p>7 Q Okay. In terms of on your body where</p> <p>8 does the floor of the ambulance come on you when</p> <p>9 you're standing up?</p> <p>10 THE WITNESS: Is that all right?</p> <p>11 MR. LEEDBERG: If you know. Don't</p> <p>12 guess.</p> <p>13 A Roughly, right in here. (Indicating.)</p> <p>14 MR. LEEDBERG: Verbalize that.</p> <p>15 A The waist, just below the waist.</p> <p>16 Q Okay. Let's see, when your arms are</p> <p>17 down by your side, about where your wrist -- your</p> <p>18 wrist joins your hands?</p> <p>19 A For the....</p> <p>20 Q Where your wrist comes together with</p> <p>21 your hand, is that about where it is?</p> <p>22 A Yes.</p> <p>23 Q If you put that on your side, is that</p> <p>24 where it is?</p>	<p style="text-align: right;">53</p> <p>1 Q Okay. And that's one end of the</p> <p>2 stretcher, that's the end closest to you; is that</p> <p>3 right?</p> <p>4 A Correct.</p> <p>5 Q Is that the end with the patient's head</p> <p>6 or the patient's feet?</p> <p>7 A The patient's feet.</p> <p>8 Q Okay. And as you bring the ambulance --</p> <p>9 as you bring the stretcher out of the ambulance,</p> <p>10 what else happens mechanically to the stretcher?</p> <p>11 A It clicks and locks into place.</p> <p>12 Q Okay. Well, you've -- you've got a</p> <p>13 stretcher that's got two sets of wheels --</p> <p>14 A Um-hm.</p> <p>15 Q -- holding it up in the ambulance,</p> <p>16 right?</p> <p>17 A Yes, the same wheels that are on the</p> <p>18 ground.</p> <p>19 Q Okay. Do all four wheels come down at</p> <p>20 once?</p> <p>21 A Yes, they're all attached.</p> <p>22 Q And what is the other end of the -- the</p> <p>23 stretcher attached to while the wheels are coming</p> <p>24 down?</p>

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1 A Attached to the -- you mean to the  
2 ambulance?

3 Q Yeah, what's it holding onto?

4 A There's actually -- I believe there's  
5 about eight sets of wheels on it.

6 Q Okay. So they're --

7 A There's --

8 Q My point is that there's some set of  
9 wheels that are on the floor of the ambulance  
10 while the other wheels are coming down; is that  
11 right?

12 A Yeah, there's two front little wheels.

13 As you pull out --

14 Q Yeah.

15 A -- they ride along the floor.

16 Q Yeah. And they come down?

17 A No, those are fixed to the stretcher.

18 Q These are in the back you're talking  
19 about?

20 A Yes.

21 Q And they're still on the floor while the  
22 other wheels are coming down on the ground outside  
23 the --

24 A Yeah, they don't physically move.

55

1 They're mounted to the front of the stretcher.

2 Q Okay.

3 A There's two of them on either side.

4 Q All right. So when those wheels come  
5 down, is the stretcher at that point supposed to  
6 be self-supporting in terms of holding up the  
7 patient?

8 A After you hear the click.

9 Q After you hear the click.

10 A We hear the click, yes, they are  
11 standing on the four -- they're supported by those  
12 four wheels that are on the ground.

13 Q Okay.

14 A Depending on elevation, sometimes your  
15 front wheels on your stretcher that are mounted up  
16 to the front, sometimes they'll sit on the edge of  
17 the ambulance.

18 Q Okay. When you brought Mr. Koran out of  
19 the ambulance, do you remember hearing the click?

20 A Yes.

21 Q Okay. And when he was -- the ambulance  
22 -- did the ambulance come out of the vehicle  
23 immediately?

24 MR. LEEDBERG: Objection as to form.

56

1 Q I'm sorry. Did the stretcher come out  
2 of the ambulance immediately?

3 A What do you mean by....

4 Q Well, in other words, did it come out  
5 completely?

6 A No, we come out very slow.

7 Q Okay. And why was that?

8 A Patient's comfort, you don't want to  
9 scare them. I mean, there's no rush.

10 Q Oh, sure. But as you brought it out,  
11 you said the wheels dropped down; is that right?

12 A Yes, it came out very -- very -- you  
13 always come out slow --

14 Q Okay.

15 A -- and then you lift it up slightly as  
16 you're pulling it out, the wheels, you hear a  
17 click when they lock.

18 Q Yeah.

19 A And then after that, you place it just  
20 gently on the ground and then you wheel it away  
21 from the ambulance.

22 Q Okay. So the wheels drop down and click  
23 before the wheels actually touch the ground; is  
24 that what you're saying?

57

1 A Yes.

2 Q Okay. And what happened with Mr. Koran  
3 in this particular instance when the wheels  
4 came -- when you brought the stretcher out of the  
5 ambulance?

6 A It was so long ago, I -- like I usually  
7 do, I unlocked the -- opened the doors to the  
8 back, I unlocked the stretcher from the ambulance,  
9 I slowly pulled it out, lifting it up as I come  
10 up, just so I can get the wheels to click down,  
11 the wheels clicked. I placed the stretcher down.  
12 The rear wheels I believe were still hanging over  
13 the back of the ambulance.

14 Q Okay. What happened next?

15 A I slowly pulled it away. I do not  
16 remember if Mr. Tolson was in or out of the  
17 ambulance at that time.

18 Q Okay. What happened next?

19 A As I pulled it away, the stretcher  
20 collapsed, not really collapsed, but it came down.

21 Q Okay. And any idea why that happened?

22 A No idea.

23 Q If you wanted the stretcher to go down  
24 flat, what would you have to do?

15 (Pages 54 to 57)

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<p>58</p> <p>1 A You need two people to lower it; there's 2 levers on either side of it. 3 Q And the lever -- can the levers lower it 4 from one side alone? 5 A I believe you need two. 6 Q So the levers have to be held on both -- 7 A Yeah, and then -- to push it down. 8 Q So one person doing it can't do it; is 9 that what you're saying? 10 A Yes. 11 Q All right. You're hesitant. I mean, do 12 you -- are you comfortable saying that one person 13 at the -- attending the stretcher cannot lower it 14 by himself? 15 MR. LEEDBERG: Don't guess. If you 16 know, you know. 17 A I'll say no, I can't -- 18 Q You don't know, or are you saying -- I'm 19 sorry, you answer it. 20 A What was it? I mean.... 21 Q Do you know whether or not one person 22 can lower it by himself? 23 A Yes, if you touch the lever, I think. 24 Q Okay. So one person -- sorry. Go</p>	<p>60</p> <p>1 gradual, I remember. It wasn't like a sudden.... 2 Q Okay. And to what level did it drop? 3 A I don't recall the exact height. 4 Q Okay. What did you do when that 5 happened? 6 A Right after it happened we -- I asked 7 Mr. Koran if he was all right. He said, Oh, yeah, 8 I'm fine. I'm fine. I think he was more scared, 9 startled -- 10 Q Sure. 11 A -- which is understandable. 12 Q Was Mr. Tolson out there at that point? 13 A I don't recall. 14 Q What did you do in terms of Mr. Koran's 15 transport at that point? 16 A Asked him several -- several times if he 17 was all right. If he was hurt at all. He stated, 18 no, he was fine. 19 Q Okay. What happened next? 20 A Wheeled him into the ER, went through 21 the first set of doors. I remember asking him 22 again if he was all right. 23 Q How did you wheel him? 24 A Just with a -- like we usually do, but</p>
<p>59</p> <p>1 ahead. 2 A No, go ahead. 3 Q So one person can, by -- by using those 4 levers, lower the stretcher himself? 5 A I don't -- no. 6 MR. LEEDBERG: If you know, you 7 know. Don't guess. 8 A No, I -- 9 Q No, you can't do it or no, you don't 10 know? 11 A It's been a while since I've been on 12 the -- since this incident; that's the reason why. 13 Q Okay. If you're not sure, you need to 14 say that. 15 A I'm not sure. 16 Q Okay. Mr. Koran comes out and the 17 stretcher goes down? 18 A Um-hm. 19 MR. LEEDBERG: Objection as to form. 20 Q What happens -- what happens when that 21 occurs? 22 MR. LEEDBERG: Go ahead and answer. 23 A It dropped to -- I don't know the 24 approximate drop, but it wasn't like -- it was a</p>	<p>61</p> <p>1 it was lower. 2 Q How much lower? 3 A Maybe waist level. 4 Q Okay. As opposed to where; what level 5 would it usually be? 6 A That stretcher it's been a long time. 7 Just below the waist. 8 Q All right. What -- and what I'm asking 9 you is what the usual height would be on you, 10 figure on you. 11 A On that stretcher, it's been a while 12 since I've used it. 13 Q Yeah. Well, in terms of the stretchers 14 you're used to, what height are they usually at? 15 A Usually like around here I think it is. 16 (Indicating.) 17 Q Your abdomen? 18 A Yeah, abdomen. 19 Q Yeah. And it went down to what level? 20 A I believe just below the waist. It was 21 a long time. 22 Q Is that as low as it went or did you 23 raise it up to that level? 24 A After the incident?</p>

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<p style="text-align: right;">62</p> <p>1 Q Yes.</p> <p>2 A Left it at that level.</p> <p>3 Q So the lowest that it went was just to</p> <p>4 below the waist?</p> <p>5 A It was somewhere just below the waist.</p> <p>6 Q Okay. Above the knees?</p> <p>7 A Yeah.</p> <p>8 Q Okay. And that's -- that's the level it</p> <p>9 came to, not a level you moved it to; is that what</p> <p>10 you're saying?</p> <p>11 A That's what it dropped to.</p> <p>12 Q Okay. All right. And was there a</p> <p>13 reason why you left the -- the stretcher at that</p> <p>14 level to bring him into the hospital?</p> <p>15 A I don't recall.</p> <p>16 Q Do you remember whether or not you tried</p> <p>17 to move it back up to the usual level?</p> <p>18 A I don't recall on that one.</p> <p>19 Q When Mr. Koran came out of the -- of the</p> <p>20 ambulance -- before he came out of the ambulance,</p> <p>21 he was -- he was in a seated position I think you</p> <p>22 said; is that right?</p> <p>23 A Yes.</p> <p>24 Q When you brought him out of the</p>	<p style="text-align: right;">64</p> <p>1 by.</p> <p>2 Q All right. Is the handle at a -- the</p> <p>3 horizontal level or is it at the height of the</p> <p>4 shoulders when you're seated?</p> <p>5 A It's at the horizontal. It would be at</p> <p>6 the feet level, the frame of the stretcher.</p> <p>7 Q All right. I got it.</p> <p>8 Okay. When -- when you went into</p> <p>9 the hospital, which end of the stretcher were you</p> <p>10 on?</p> <p>11 A I was on the feet.</p> <p>12 Q Okay. And when you're on the feet --</p> <p>13 which is the first part that goes in I think you</p> <p>14 said; is that right?</p> <p>15 A Yes, I believe it was at the feet.</p> <p>16 Q Okay. Do you walk in facing the patient</p> <p>17 or with your back to the patient?</p> <p>18 A Oh, when you bring -- the feet first.</p> <p>19 Q Feet go in first?</p> <p>20 A Yes. There's no protocol which way. I</p> <p>21 believe we went in feet first that day.</p> <p>22 Q Okay. Which way were you facing?</p> <p>23 A Walking in, I believe -- it was so long,</p> <p>24 I don't recall. I don't recall the position I was</p>
<p style="text-align: right;">63</p> <p>1 ambulance, did you bring him out in the seated</p> <p>2 position or was he -- did you make him lie prone</p> <p>3 first?</p> <p>4 A No, no, you can -- seated position.</p> <p>5 Q Okay. So what part of the stretcher was</p> <p>6 at below the waist level, was it his head or his</p> <p>7 feet?</p> <p>8 A I believe it was his feet.</p> <p>9 Q Okay. So where was his head?</p> <p>10 MR. LEEDBERG: I object as to form.</p> <p>11 Answer if you can.</p> <p>12 A I don't recall the height of the head.</p> <p>13 Q Okay. Can you push -- assuming he's</p> <p>14 sitting up, can you push from the shoulder level</p> <p>15 on a seated person?</p> <p>16 A Yes. Whatever position they are in the</p> <p>17 stretcher doesn't affect or compromise the way you</p> <p>18 push the stretcher.</p> <p>19 Q Okay. But if you're in the back of the</p> <p>20 stretcher and he's -- you bring him in feet first?</p> <p>21 A Yes.</p> <p>22 Q Okay. You're at the back of the</p> <p>23 stretcher. Where do your hands go?</p> <p>24 A They have a little handle you can pull</p>	<p style="text-align: right;">65</p> <p>1 in at that date --</p> <p>2 Q Okay.</p> <p>3 A -- at that time.</p> <p>4 Q Do you ever walk in backwards?</p> <p>5 A No, you'd never like physically yourself</p> <p>6 go in backwards, no.</p> <p>7 Q Okay.</p> <p>8 A I mean you'd be facing forward. I can't</p> <p>9 recall if I was at the front of the stretcher or</p> <p>10 the back at the time after that incident.</p> <p>11 Q So to do that, do you have to stay to</p> <p>12 one side of the stretcher?</p> <p>13 A You can be in any position on the</p> <p>14 stretcher. Any sides, front, but we were in the</p> <p>15 front and back.</p> <p>16 Q What do you hold onto when you're --</p> <p>17 when you're facing away and your -- and your back</p> <p>18 is to the stretcher?</p> <p>19 A There's a little -- I forget what -- I</p> <p>20 don't know exactly what they call it. There's a</p> <p>21 little lever there, handle, that you can pull.</p> <p>22 Q Reach back?</p> <p>23 A Yeah, you reach back like this so you</p> <p>24 can hold the framework. (Indicating.)</p>

17 (Pages 62 to 65)



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<p style="text-align: right;">66</p> <p>1 Q All right. And is that your 2 recollection, that you were at the front and 3 Mr. Tolson, was he at the back? 4 MR. LEEDBERG: Objection as to form. 5 Go ahead and answer. 6 A I don't recall on that incident. 7 Q Okay. You were definitely at the front, 8 though? 9 MR. LEEDBERG: Objection as to form. 10 A I don't recall. I was at the feet when 11 I took it out. When I wheeled it in, I don't 12 recall on that; I bring so many patients up there. 13 Q Okay. And you don't recall whether or 14 not Mr. Tolson went in with you? 15 A He did. 16 Q He did? 17 A Yeah, you need two people to pull that 18 in with a patient on it. 19 Q Okay. And you just have no recollection 20 now which end you were on? 21 A I've made so many transports since then 22 I don't recall if I was in the front or back, but 23 you do need, when you have a patient on the back 24 -- when you have a patient on the stretcher, you</p>	<p style="text-align: right;">68</p> <p>1 up? 2 A Don't recall on that, but he was asked 3 several times, several times walking in, if he was 4 all right, and he stated he had no other pains due 5 to that incident, just the foot from the -- being 6 run over. 7 Q Okay. What -- what happened when you 8 got him into the hospital? 9 A Met by the nurse, I believe. 10 Q Yeah. 11 A And they gave us a room assignment, and 12 then we slid him over to the ER bed. And then he 13 was asked several times in there if he was all 14 right and he had any type of injury from the 15 incident that we had, and he stated, no, he was 16 fine. He just had, you know, the chief complaint 17 of the pain from the incident, from being run 18 over. 19 Q Okay. 20 A He had no other complaints of pain or 21 anything. Just he stated a couple times that he 22 was just scared. And we apologized for the 23 incident. And he was like, That's all right, and 24 he was I think more agitated about the whole</p>
<p style="text-align: right;">67</p> <p>1 need two people, because the stretcher -- the four 2 wheels underneath swivel, and the thing would be 3 all over the place. 4 Q Okay. Do you remember whether or not 5 you made some attempt to raise the -- the 6 stretcher back up to the usual level? 7 MR. LEEDBERG: Objection as to form. 8 Go ahead and answer if you can, Scott. 9 A I don't recall on that. 10 Q All right. Would that be your usual 11 practice, to raise it back up to that level? 12 MR. LEEDBERG: Objection as to form. 13 A I've never had it happen to me before. 14 Q Okay. 15 A I don't recall. I just remember, you 16 know, that I hate to see a patient be upset like 17 that. I mean, I usually try to.... 18 Q Sure. 19 A I didn't want to -- I can't recall on 20 it -- 21 Q Okay. 22 A -- on that incident. 23 Q Do you have a memory now as to whether 24 or not you tried and weren't able to raise it back</p>	<p style="text-align: right;">69</p> <p>1 incident he had just come from. 2 Q Okay. Do you remember any interaction 3 you had with the nurse when you came in there? 4 A I don't recall, because usually the 5 driver makes the cot up after the transport, and 6 then the tech gives the whole rundown of the 7 incident to the nurse, and I don't recall. I 8 mean, I've made so many transports. Usually I -- 9 I usually just -- if I'm not teching, I don't 10 bother with the patient and nurse interaction and 11 the tech. 12 Q Okay. Is there anything else about that 13 trip that you remember that you haven't told us? 14 A No, just he was a very agitated person. 15 Q Okay. Did you take the -- did you take 16 the stretcher back to the ambulance? 17 A Yes. 18 Q Did you do it yourself or did Mr. Tolson 19 do it? 20 A On that stretcher you need two people to 21 bring it up. 22 Q Okay. And when you brought it back, do 23 you remember what height it was at? 24 A The load height.</p>

18 (Pages 66 to 69)

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<p style="text-align: right;">70</p> <p>1 Q The lower height?</p> <p>2 A What they call the load -- when we</p> <p>3 brought it back to the --</p> <p>4 Q Yeah.</p> <p>5 A -- station.</p> <p>6 Q Yeah, when you brought it back to the</p> <p>7 ambulance.</p> <p>8 A I don't remember if we wheeled it out in</p> <p>9 the position that we took Mr. Koran in or if we</p> <p>10 raised it in the ER. I don't recall on that.</p> <p>11 Q Okay. Did you have to raise it to get</p> <p>12 it into the ambulance?</p> <p>13 A I don't remember -- I remember we got</p> <p>14 it -- if I -- we got it to -- raised it up to the</p> <p>15 load position, and then put it in back of the</p> <p>16 ambulance, I believe -- yeah.</p> <p>17 Q Okay. Do you remember if you had any</p> <p>18 problem doing that?</p> <p>19 A Since then?</p> <p>20 Q No. At the time did you have a problem</p> <p>21 getting it up to the load position?</p> <p>22 A I don't recall on that.</p> <p>23 Q Okay. After that, did you examine the</p> <p>24 stretcher?</p>	<p style="text-align: right;">72</p> <p>1 A I'm not certified to work on it, no. I,</p> <p>2 and I didn't want to make things worse.</p> <p>3 Q Okay.</p> <p>4 A I mean, I didn't want to mess with it.</p> <p>5 I figured it's out of my -- not -- you know, I</p> <p>6 didn't -- you take the proper channels, which is</p> <p>7 to bring it back. I mean --</p> <p>8 Q And did you do that?</p> <p>9 A Yes, this Exhibit 2 --</p> <p>10 Q Yeah.</p> <p>11 A -- which would be the accident run</p> <p>12 report --</p> <p>13 Q Yeah.</p> <p>14 A -- or the incident report.</p> <p>15 Q Okay. I want to ask you about that in</p> <p>16 just a second.</p> <p>17 Okay, is all of the writing on that</p> <p>18 document yours?</p> <p>19 A Yes.</p> <p>20 Q And your signature at the end?</p> <p>21 A Yes.</p> <p>22 MR. LEEDBERG: Just for the record,</p> <p>23 we're referring to Exhibit 2?</p> <p>24 MR. DURSO: Exhibit 2, right.</p>
<p style="text-align: right;">71</p> <p>1 A Just maybe a quick glance over, that's</p> <p>2 it.</p> <p>3 Q Okay. Had you ever had a stretcher that</p> <p>4 did what that stretcher did previously?</p> <p>5 A No.</p> <p>6 Q So were you concerned or curious as to</p> <p>7 why it happened?</p> <p>8 A Yeah.</p> <p>9 Q Okay. What did you do to find out?</p> <p>10 A We --</p> <p>11 MR. LEEDBERG: Objection as to form.</p> <p>12 Answer if you can, Scott.</p> <p>13 A -- brought and filled out the incident</p> <p>14 report.</p> <p>15 Q The form you're talking about which is</p> <p>16 Exhibit 2?</p> <p>17 A Yes, Exhibit 2.</p> <p>18 Q Well, we'll come to that in a minute. I</p> <p>19 mean in terms of looking at the stretcher itself</p> <p>20 to figure out what happened, did you do</p> <p>21 anything --</p> <p>22 A Looked at it briefly, but I didn't want</p> <p>23 to touch it.</p> <p>24 Q Why?</p>	<p style="text-align: right;">73</p> <p>1 Q Would you -- would you be good enough</p> <p>2 just to read everything to me that it says on that</p> <p>3 report?</p> <p>4 A "When loading patient out of the</p> <p>5 ambulance, the stretcher did not stay up in lock</p> <p>6 mode and went down to the ground. Patient was not</p> <p>7 injured."</p> <p>8 Q What does "lock mode" mean?</p> <p>9 A That's when -- what I was explaining</p> <p>10 earlier, when the wheels come down when you pull</p> <p>11 it out, you get a click.</p> <p>12 Q Yeah, okay. And when it's in lock mode,</p> <p>13 is that the load level you referred to previously?</p> <p>14 A Yeah. It would be the unload, load</p> <p>15 level.</p> <p>16 Q Okay. And what did you do with this</p> <p>17 report, this -- this incident form?</p> <p>18 A I filled it out, and it was given to the</p> <p>19 chief of the department.</p> <p>20 Q Who was that?</p> <p>21 A Chief McPherson --</p> <p>22 Q Okay.</p> <p>23 A -- I believe at the time, because we</p> <p>24 went through some changes. I believe he was the</p>

19 (Pages 70 to 73)

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<p style="text-align: right;">74</p> <p>1 chief.</p> <p>2 Q When you came back -- you came back here</p> <p>3 to the station, right?</p> <p>4 A Yes.</p> <p>5 Q All right. When you came back here to</p> <p>6 the station, was Ron Buckler here?</p> <p>7 A Everybody was here because of the drill.</p> <p>8 Q Was Chief McPherson here then?</p> <p>9 A I don't -- yeah, I believe so, because</p> <p>10 it was a drill night.</p> <p>11 Q Okay. When you got back here, what did</p> <p>12 you do, if anything, with regard to the stretcher</p> <p>13 itself?</p> <p>14 A I did nothing. We just filled out the</p> <p>15 accident run report.</p> <p>16 Q Did anybody else look at the stretcher?</p> <p>17 A I don't know.</p> <p>18 Q Okay. Well, if you had another run that</p> <p>19 night, you would have had to use that same</p> <p>20 stretcher, right?</p> <p>21 A Yes.</p> <p>22 Q It was the only one?</p> <p>23 A Yes.</p> <p>24 Q So didn't somebody look at it to say,</p>	<p style="text-align: right;">76</p> <p>1 but everyone calls him John.</p> <p>2 Q Okay. And you think the two of them</p> <p>3 went to look at it?</p> <p>4 A It was so long ago, I just remember</p> <p>5 filling this out and then we went back into drill.</p> <p>6 Q Did you go back out that night on a run?</p> <p>7 A No.</p> <p>8 Q Do you know whether or not that</p> <p>9 stretcher stayed in service?</p> <p>10 A I believe it was taken out for that</p> <p>11 time. I don't recall. I can't recall on that.</p> <p>12 Q Okay. If it was taken out of service,</p> <p>13 is there some form that would be filled out with</p> <p>14 regard to that?</p> <p>15 A That would be -- that wouldn't deal with</p> <p>16 me --</p> <p>17 Q Okay.</p> <p>18 A -- on that.</p> <p>19 Q I've seen some forms that -- in the</p> <p>20 stuff you just gave me here. Are you familiar</p> <p>21 with the ambulance checklist forms?</p> <p>22 A Yes.</p> <p>23 Q Okay. Do you fill those out?</p> <p>24 A Yes. I have not in a while.</p>
<p style="text-align: right;">75</p> <p>1 Gee, we've got to make sure this doesn't happen</p> <p>2 again if we have another run tonight?</p> <p>3 MR. LEEDBERG: Objection to form.</p> <p>4 Go ahead and answer if you can.</p> <p>5 A I believe someone looked at it.</p> <p>6 Q And who do you think that was?</p> <p>7 A I do not know. I can't answer. I</p> <p>8 filled this out and they went down and they looked</p> <p>9 at it.</p> <p>10 Q Okay. Who would -- who was the possible</p> <p>11 people who could have looked at it?</p> <p>12 A The deputy went down, I believe. Let me</p> <p>13 think a second. I believe the deputy went down</p> <p>14 and looked at it, and I can't remember if --</p> <p>15 Q And that's Ron Buckler?</p> <p>16 A Ron Buckler and --</p> <p>17 Q When you say the deputy, that's what you</p> <p>18 mean, right?</p> <p>19 A Yes, and the captain of the EMS. I</p> <p>20 believe, might have went down.</p> <p>21 Q And who is that.</p> <p>22 A John Dowse.</p> <p>23 Q D-O-W-S-E?</p> <p>24 A Yes, or Jonathan is the official name,</p>	<p style="text-align: right;">77</p> <p>1 Q With respect to the -- with respect to</p> <p>2 the ambulance, was that something that you would</p> <p>3 fill out?</p> <p>4 A Yes.</p> <p>5 Q Okay. And one of the things, one of the</p> <p>6 first things it says on there is ambulance cot</p> <p>7 with IV pole. Is that the stretcher we're talking</p> <p>8 about?</p> <p>9 A Yes.</p> <p>10 Q Okay. And the next time that one of</p> <p>11 these forms had to be filled out, if there was a</p> <p>12 change in that -- in that stretcher, would it be</p> <p>13 noted on one of these forms?</p> <p>14 A It's been a long time.</p> <p>15 Q Well, I'm talking about the procedure.</p> <p>16 What --</p> <p>17 A If you found something major wrong, you</p> <p>18 would notify immediately one of the officers of</p> <p>19 the, you know, the incident, the situation, and</p> <p>20 what you found. There would be something put in</p> <p>21 writing. I haven't filled one of those EMS ones</p> <p>22 out in a while.</p> <p>23 Q Okay. Well, I guess here's my question.</p> <p>24 A Yeah.</p>

20 (Pages 74 to 77)

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<p style="text-align: right;">78</p> <p>1 Q What you've told us is that the -- that</p> <p>2 the -- the deputy and the captain may have gone</p> <p>3 down to look at this -- this stretcher. If they</p> <p>4 found something wrong with it, is there a piece of</p> <p>5 paper in which the information would appear?</p> <p>6 A I don't know on that, because that's up</p> <p>7 at their -- I mean, if they -- they're management,</p> <p>8 I guess you could say management, but I should say</p> <p>9 they're officers.</p> <p>10 Q Sure, I know what you mean.</p> <p>11 A That's, you know, what they do.</p> <p>12 Q Yeah.</p> <p>13 A It really doesn't pertain to us.</p> <p>14 Q Okay. When's the next time you heard</p> <p>15 anything about this stretcher after that?</p> <p>16 A I don't recall on that.</p> <p>17 Q Did you ever hear anything further about</p> <p>18 the stretcher?</p> <p>19 A They had a company come out and look at</p> <p>20 it --</p> <p>21 Q Yeah.</p> <p>22 A -- I remember that, and that's all I</p> <p>23 recall.</p> <p>24 Q Well, do you remember having a different</p>	<p style="text-align: right;">80</p> <p>1 back of A1.</p> <p>2 Q Okay. Let me just take that back for a</p> <p>3 second.</p> <p>4 A Yeah.</p> <p>5 MR. DURSO: All right. What do we</p> <p>6 have, three exhibits up to this? Would you mark</p> <p>7 this as Exhibit 4, please?</p> <p>8 (Document marked as Exhibit No. 4.)</p> <p>9 Q Okay, I'm going to show you page 11 from</p> <p>10 what we've marked as Exhibit 4, and just ask you</p> <p>11 if you can tell me whether or not those represent</p> <p>12 the available positions in which you can put the</p> <p>13 particular stretcher that you had in --</p> <p>14 A Yes.</p> <p>15 Q -- ambulance -- let me finish.</p> <p>16 A Oh, sorry.</p> <p>17 Q That's all right.</p> <p>18 -- that you had in ambulance A1 on</p> <p>19 February 6, 2003?</p> <p>20 A Which one was it in?</p> <p>21 Q No, I'm asking if those are the</p> <p>22 positions that the stretcher that was in ambulance</p> <p>23 A1 on February 6, 2003, if those are the positions</p> <p>24 it could be in?</p>
<p style="text-align: right;">79</p> <p>1 stretcher in the ambulance after that?</p> <p>2 A I don't recall, because I was off shift</p> <p>3 for six days, and unless you get a call down here</p> <p>4 or you come in for training --</p> <p>5 Q Sure.</p> <p>6 A -- you know, it's -- where it's a call</p> <p>7 department, you're not around really.</p> <p>8 Q Okay. When you came back on, though,</p> <p>9 would you have a concern as to whether or not the</p> <p>10 stretcher was operating properly?</p> <p>11 A Yeah, I believe I probably -- because</p> <p>12 part of the checklist is to clean it, the</p> <p>13 ambulance, make sure it's clean, you know, check</p> <p>14 all of the stuff on the list, and you always pull</p> <p>15 the stretcher out because you have to clean the</p> <p>16 floor and mop it.</p> <p>17 Q Okay.</p> <p>18 A I can't recall if I -- if I -- I mean, I</p> <p>19 must have because I take it out to clean it. I</p> <p>20 mean --</p> <p>21 Q Would you take a look at the picture on</p> <p>22 the outside of that cover and just tell me whether</p> <p>23 or not you recognize that -- that -- the drawing.</p> <p>24 A I believe that's our stretcher in the</p>	<p style="text-align: right;">81</p> <p>1 A It could be in.</p> <p>2 Q Okay. All right. Would it be fair to</p> <p>3 say that -- that -- well, let me show you a</p> <p>4 different --</p> <p>5 MR. DURSO: Off the record.</p> <p>6 (Off record.)</p> <p>7 Q Well, let's look at this one on page 24.</p> <p>8 In terms of -- this figure V --</p> <p>9 A Um-hm.</p> <p>10 Q -- in terms of coming out of the</p> <p>11 ambulance, is this setup that's shown here</p> <p>12 consistent with ambulance A1 --</p> <p>13 A Yes.</p> <p>14 Q -- and your stretcher?</p> <p>15 Okay. So what you told us before is</p> <p>16 that the ambulance -- the stretcher would come out</p> <p>17 of the ambulance and the wheels that are shown on</p> <p>18 your right would be on the floor of the ambulance,</p> <p>19 and these other four wheels shown on the structure</p> <p>20 underneath would come down with a snap on the</p> <p>21 ground; is that right?</p> <p>22 A Yes.</p> <p>23 Q Okay. And then you would just bring it</p> <p>24 forward, resting on those four wheels?</p>

21 (Pages 78 to 81)



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<p style="text-align: right;">82</p> <p>1 A On these four, yes.</p> <p>2 Q Okay. But that what happened instead</p> <p>3 here is that the ambulance -- the stretcher</p> <p>4 dropped down, and are you able to identify which</p> <p>5 of the positions it was in when it dropped down?</p> <p>6 A It would be either one of these two.</p> <p>7 (Indicating.)</p> <p>8 Q And tell me which two you're referring</p> <p>9 to.</p> <p>10 A The low level --</p> <p>11 Q Yeah.</p> <p>12 A -- and mid level.</p> <p>13 Q Okay. All right. And the difference</p> <p>14 between what we see in these positions and what</p> <p>15 actually happened that day, is that the back piece</p> <p>16 to the right would be lifted up because --</p> <p>17 A Correct.</p> <p>18 Q -- the patient was in a seated position;</p> <p>19 is that correct?</p> <p>20 A Correct. But these -- this structure</p> <p>21 here (indicating) stays flat.</p> <p>22 Q Horizontal?</p> <p>23 A Horizontal.</p> <p>24 Q Yeah.</p>	<p style="text-align: right;">84</p> <p>1 A I don't recall on that.</p> <p>2 Q Okay. You had said before you thought</p> <p>3 you might have raised it to what you called the</p> <p>4 load position. Is the load position the high-</p> <p>5 level position?</p> <p>6 A Well, we bring it out the high level,</p> <p>7 out to the ambulance, and then place it in the</p> <p>8 load position.</p> <p>9 Q Which is what?</p> <p>10 A What it's in here. (Indicating.)</p> <p>11 They -- it's slightly straighter.</p> <p>12 Q Okay.</p> <p>13 A It brings it up a little higher, the</p> <p>14 head.</p> <p>15 Q You have to raise it up a little bit to</p> <p>16 get it into the --</p> <p>17 A Into the -- yeah.</p> <p>18 Q Okay. That's what you meant.</p> <p>19 A Yeah.</p> <p>20 Q So in order to put the stretcher back</p> <p>21 into the ambulance, did you have to get it into</p> <p>22 this loading position or would you be able to load</p> <p>23 it from one of the other positions?</p> <p>24 A You can't load it from this position</p>
<p style="text-align: right;">83</p> <p>1 A It's just the cot part there with some</p> <p>2 metal framing comes up.</p> <p>3 Q Okay. I'm going to show you page 10,</p> <p>4 figure G. Is that the part you're referring to</p> <p>5 that comes up?</p> <p>6 A Yes.</p> <p>7 Q Okay. So that part was elevated --</p> <p>8 A Yes.</p> <p>9 Q -- so that Mr. Koran was in a --</p> <p>10 relatively in a sitting position as opposed to a</p> <p>11 prone position when he was coming out of the</p> <p>12 vehicle. Have I stated that correctly?</p> <p>13 A Yes.</p> <p>14 Q Okay. Okay, so your recollection is</p> <p>15 that Mr. Koran ended up, after the stretcher came</p> <p>16 out, in either the low-level or the mid-level</p> <p>17 position; is that right?</p> <p>18 A Correct.</p> <p>19 Q Okay. And was wheeled into the hospital</p> <p>20 in that position?</p> <p>21 A Yes, into the ER.</p> <p>22 Q Okay. And coming back out, do you think</p> <p>23 that you raised it back up to the high-level</p> <p>24 position before you wheeled it back up?</p>	<p style="text-align: right;">85</p> <p>1 without two people lifting it up in.</p> <p>2 Q Okay. And do you have a recollection</p> <p>3 whether you did that?</p> <p>4 A I can't recall.</p> <p>5 Q Okay. Do you believe you got it to the</p> <p>6 loading position before you put it back?</p> <p>7 MR. LEEDBERG: Objection to the</p> <p>8 form. Answer if you can.</p> <p>9 A I don't recall.</p> <p>10 Q All right. Well, you got it back into</p> <p>11 the vehicle?</p> <p>12 A It was back in the vehicle, yes.</p> <p>13 Q Okay. So the only two ways you could</p> <p>14 get it back in the vehicle, if I understand you</p> <p>15 correctly, is either by getting it into the</p> <p>16 loading position or the two of you picking it up</p> <p>17 and putting it in --</p> <p>18 A Physically you could -- you could</p> <p>19 physically pick it up from any position --</p> <p>20 Q Okay.</p> <p>21 A -- and --</p> <p>22 Q And you don't remember which of those</p> <p>23 two happened?</p> <p>24 A I don't recall --</p>

22 (Pages 82 to 85)

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<p style="text-align: right;">86</p> <p>1 Q Okay. Good.</p> <p>2 A -- on that.</p> <p>3 Q Okay. Do you remember being told by</p> <p>4 anybody at any time what happened to the stretcher</p> <p>5 on that particular day?</p> <p>6 A Telling them?</p> <p>7 Q No, did anyone tell you.</p> <p>8 MR. LEEDBERG: I'm going to object</p> <p>9 as to form.</p> <p>10 Q In other words, after February 6, the</p> <p>11 next time you came back to work or at any later</p> <p>12 date did anyone ever say to you, Here's what</p> <p>13 happened, that's why that thing happened with the</p> <p>14 stretcher?</p> <p>15 A I don't recall what the exact cause of</p> <p>16 it was. I just know they had a company come right</p> <p>17 out the next day.</p> <p>18 Q And do you remember hearing what the</p> <p>19 company said about the -- about the device?</p> <p>20 A No, I don't recall on that.</p> <p>21 Q Okay. Do you ever remember anyone</p> <p>22 saying that there was some piece of a handle or</p> <p>23 some piece of equipment on the stretcher that was</p> <p>24 bent?</p>	<p style="text-align: right;">88</p> <p>1 THE WITNESS: All right.</p> <p>2 Q How did you learn how to operate the</p> <p>3 stretcher?</p> <p>4 A The Captain Dowse, he's a deputy now, he</p> <p>5 was a captain at the time, when I was a first</p> <p>6 responder and I used to work on the ambulance, he</p> <p>7 took me through the basic operations of the</p> <p>8 ambulance, what I can do, what I can't do, how to</p> <p>9 do it.</p> <p>10 Q Okay. And that included operating the</p> <p>11 stretcher?</p> <p>12 A Yes, that's something you can do as a</p> <p>13 first responder.</p> <p>14 Q So he showed you the mechanism and how</p> <p>15 it worked --</p> <p>16 A Yeah.</p> <p>17 Q -- and -- how it was supposed to work.</p> <p>18 If there's -- if there's ever a</p> <p>19 problem with the stretcher, who -- while you're on</p> <p>20 a run, whose job is it to deal with the mechanical</p> <p>21 operation of the stretcher?</p> <p>22 MR. LEEDBERG: Objection as to form.</p> <p>23 Go ahead and answer.</p> <p>24 A It would be the senior office in the</p>
<p style="text-align: right;">87</p> <p>1 A I remember I think -- I remember hearing</p> <p>2 something about it.</p> <p>3 Q Okay. Any memory as to who you heard it</p> <p>4 from?</p> <p>5 A No, it was so long ago.</p> <p>6 Q Okay. Prior to this incident on</p> <p>7 February 6, 2003, do you ever remember having any</p> <p>8 kind of difficulty with the stretcher?</p> <p>9 A No, not at all that I had worked with</p> <p>10 it.</p> <p>11 Q Okay. I'm not talking just about the</p> <p>12 stretcher falling down.</p> <p>13 A Yeah.</p> <p>14 Q I'm talking about did it ever fail to</p> <p>15 snap into place; did you ever have any difficulty</p> <p>16 of any kind with it?</p> <p>17 A Not as long as I was on the department</p> <p>18 before that that I remember hearing.</p> <p>19 Q Okay.</p> <p>20 MR. DURSO: All right. Give me just</p> <p>21 a second and we may be close to done.</p> <p>22 (Pause.)</p> <p>23 MR. DURSO: Just a couple more</p> <p>24 questions and you'll be all set.</p>	<p style="text-align: right;">89</p> <p>1 station if there's somebody there. If there's no</p> <p>2 one there, call the lieutenant of the ambulance,</p> <p>3 make him aware of the situation. He can make his</p> <p>4 decision from there depending on what the....</p> <p>5 Q Okay. Did you have any training in the</p> <p>6 mechanical operation, other than simply having the</p> <p>7 legs snap down and --</p> <p>8 A Yes.</p> <p>9 Q Yeah. What did the training consist of?</p> <p>10 A Running through the whole thing --</p> <p>11 Q So --</p> <p>12 A -- at the time.</p> <p>13 Q -- were you able -- would you be able</p> <p>14 to, through your training, deal with any</p> <p>15 mechanical issues or....</p> <p>16 A I'm not trained on it.</p> <p>17 Q No. Okay. So your training didn't</p> <p>18 include --</p> <p>19 A It didn't include a maintenance -- I</p> <p>20 mean, maintenance of it to look, you know, if</p> <p>21 something looks out of the ordinary, but it</p> <p>22 included the operation of the stretcher.</p> <p>23 Q Okay. If you wanted the stretcher to</p> <p>24 fold down from the -- the high-level position, how</p>

23 (Pages 86 to 89)

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<p>90</p> <p>1 would you do it?</p> <p>2 A Down to the mid-level.</p> <p>3 Q Or low level?</p> <p>4 A Or lower.</p> <p>5 Q Or -- or -- yeah. Or the folded</p> <p>6 position for that matter.</p> <p>7 A I don't believe you can do that.</p> <p>8 Q You don't believe you can do what?</p> <p>9 A The folding position without hitting the</p> <p>10 lock. It's been a while since I've worked on this</p> <p>11 ambulance with that stretcher, because my</p> <p>12 department, where I work full-time, we have a</p> <p>13 different stretcher --</p> <p>14 Q Okay.</p> <p>15 A -- since then, and it's been a while</p> <p>16 since I've -- but I believe in that type of</p> <p>17 stretcher you cannot go to the folding position</p> <p>18 without hitting the loading lock I believe they</p> <p>19 call it on this type of stretcher.</p> <p>20 Q Okay. Can you, while you have a patient</p> <p>21 on it, on the stretcher, lower it to these other</p> <p>22 levels?</p> <p>23 A Yes, you can go to the lower -- the</p> <p>24 low-level, the mid-level and the -- well, it would</p>	<p>92</p> <p>1 Q Okay. Can the person at the foot end</p> <p>2 squeeze that handle and lower it by himself just</p> <p>3 from that point?</p> <p>4 A I don't recall. It's been a long</p> <p>5 time --</p> <p>6 Q Okay.</p> <p>7 A -- since I've used this stretcher.</p> <p>8 Q Yeah.</p> <p>9 And what about the auxillary lock,</p> <p>10 what's the purpose of that?</p> <p>11 A Which lock?</p> <p>12 Q (Indicating.)</p> <p>13 A They have different names. I haven't --</p> <p>14 that's the lock -- that's the lock that you would</p> <p>15 hit -- that you would slide forward to put it down</p> <p>16 to the other position there.</p> <p>17 Q The folded level?</p> <p>18 A I believe that's what they call it, yes.</p> <p>19 Q Okay.</p> <p>20 A I believe it's folded level. The</p> <p>21 folding -- folded position.</p> <p>22 Q Yeah. Okay.</p> <p>23 MR. DURSO: All right. Okay, I</p> <p>24 think that's it.</p>
<p>91</p> <p>1 be at the high level.</p> <p>2 Q How do you do it mechanically, what do</p> <p>3 you do?</p> <p>4 A One on either side I believe on this</p> <p>5 stretcher would grab a lock and would squeeze</p> <p>6 simultaneously, which would drop the --</p> <p>7 Q See if I've got a picture.</p> <p>8 A -- the stretcher, which you don't want</p> <p>9 to touch when you're pulling it out.</p> <p>10 Q Let's see.</p> <p>11 (Counsel perusing document.)</p> <p>12 Q Are you able, looking at this particular</p> <p>13 diagram on page 7, to tell me what you would do</p> <p>14 to -- to lower the stretcher?</p> <p>15 A The undercarriage control handle --</p> <p>16 Q Yeah.</p> <p>17 A -- you'd squeeze both: there should be</p> <p>18 two on there.</p> <p>19 Q Okay. And can you just point to the</p> <p>20 diagram?</p> <p>21 A (Witness complied.)</p> <p>22 Q Okay. And that's at the foot end; is</p> <p>23 that right?</p> <p>24 A Yes.</p>	<p>93</p> <p>1 You got any questions?</p> <p>2 MR. LEEDBERG: I just want to</p> <p>3 clarify one point.</p> <p>4 EXAMINATION</p> <p>5 BY MR. LEEDBERG:</p> <p>6 Q Scott, when you were at the scene, you</p> <p>7 didn't take the cot out of the ambulance, did you,</p> <p>8 to get the plaintiff onto it?</p> <p>9 A No, I believe he went in through the</p> <p>10 door, the side door.</p> <p>11 Q Okay. So he crawled up into the</p> <p>12 ambulance?</p> <p>13 A Yes, he crawled up in the ambulance on</p> <p>14 his own.</p> <p>15 Q Okay.</p> <p>16 A And I was in the doorway with the police</p> <p>17 watching.</p> <p>18 Q And just to clarify something you just</p> <p>19 talked about with Attorney Durso. You're not</p> <p>20 trained to mechanically fix this cot, correct?</p> <p>21 A No, I am not.</p> <p>22 Q You're trained in the operation,</p> <p>23 correct?</p> <p>24 A The operation.</p>

24 (Pages 90 to 93)

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1 Q And if you see something wrong, you'll  
2 bring it to the attention --

3 A Yes. If you see something out of the  
4 ordinary from when you were trained, you would --  
5 I mean, you'd say something to an officer.

6 Q But you wouldn't venture to fix it  
7 yourself?

8 A No, would not.

9 MR. LEEDBERG: I have no further  
10 follow-ups.

11 MR. DURSO: Okay. I think that's  
12 it. Thank you.

13 (Off record at 1:08 p.m.)  
14  
15  
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17  
18  
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22  
23  
24

# ERRATA SHEET

1 I, SCOTT CHRISTENSEN, the within-named  
2 deponent do hereby certify that I have read the  
3 foregoing transcript of my testimony, and further  
4 certify that said transcript is a true and  
5 accurate record of said testimony (with the  
6 exception of the following corrections listed  
7 below):

Page	Line	Correction
10		
11		
12		
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16		
17		
18		
19		

20 Signed under the pains and penalties of  
21 perjury this day of , 2006.  
22  
23  
24

SCOTT CHRISTENSEN

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## CERTIFICATE

COMMONWEALTH OF MASSACHUSETTS  
BRISTOL, SS

1 I, Lori-Ann London, Registered  
2 Professional Reporter and Notary Public in and for  
3 the Commonwealth of Massachusetts, do hereby  
4 certify:

5 That, SCOTT CHRISTENSEN, the witness  
6 whose deposition is hereinbefore set forth, was  
7 duly sworn by me and that such deposition is a  
8 true record of the testimony given by the witness  
9 to the best of my knowledge, skill, and ability.

10 I further certify that I am neither  
11 related to, nor employed by, any of the parties in  
12 or counsel to this action, nor am I financially  
13 interested in the outcome of this action.

14 IN WITNESS WHEREOF, I have hereunto set  
15 my hand and seal of office this 2nd day of October  
16 2006.  
17  
18  
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20  
21  
22  
23  
24

Lori-Ann London, RPR

Notary Public

My commission expires: 6/15/2012

25 (Pages 94 to 96)





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8			
80 (1) 3:15			
9			
9/19/06 (1) 28:14			
91 (1) 5:7			
93 (1) 3:7			

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 4**  
**Plaintiff's Letter of February 10, 2003**



REPORT REQUEST MEMORANDUM

TO: PAM - SHERBORN FIRE AND RESCUE  
FROM: JOE KORAN  
SUBJECT: 6 FEBRUARY 2003 INCIDENT  
DATE: 2/10/2003  
CC: TOM KINGSLEY

Per our conversation on Friday 7 February 2003, this is a written request for copies of the paramedics reports and any pertinent information surrounding the events of the incident.

Please include with this information the names of those involved as well as documentation of the incident involving the faulty stretcher.

Please fax this information to my home office number: 315-699-7772.

Thank you for your prompt attention to this matter.



Joe Koran

6251 Addison Loomis

Cicero, New York 13039

Office: 315-699-7771

Home: 315-699-2288

fax: 7772

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 5**  
**Deputy Fire Chief John Dowse's Deposition**



UNITED STATES DISTRICT COURT

DISTRICT OF MASSACHUSETTS

C.A. No. 05-11454-RGS

\*\*\*\*\*

JOSEPH H. KORAN and KIMBERLY

KORAN, Individually and on Behalf

of ANA KORAN, JOSEPH KORAN, JR.,

and ERIK KORAN, Minors,

Plaintiffs,

v.

ELIZABETH WEAVER and TOWN OF

SHERBORN,

Defendants.

\*\*\*\*\*

DEPOSITION OF JONATHAN H. DOWSE,

a witness called on behalf of the Plaintiffs,

taken pursuant to the Federal Rules of Civil

Procedure, before Maureen O'Connor Pollard, RPR,

CLR, and Notary Public within and for the

Commonwealth of Massachusetts, at the offices of

Sherborn Fire Department, 22 North Main Street,

Sherborn, Massachusetts, on the 17th of October,

2006, commencing at 11:00 o'clock a.m.



Jonathan H. Dowse

10/17/2006

1 APPEARANCES:	1 PROCEEDINGS
2 FOR THE PLAINTIFF:	2
3 BY: MATTHEW P. COLETTI, ESQ.	3 JONATHAN H. DOWSE,
4 CARMEN L. DURSO, ESQ.	4 having been identified by Massachusetts driver's
5 LAW OFFICE OF CARMEN L. DURSO	5 license, being first duly sworn, was examined
6 175 Federal Street	6 and testified as follows:
7 Boston, Massachusetts 02110-2241	7 DIRECT EXAMINATION
8 617-728-9212	8 BY MR. COLETTI:
9 dursolaw@tiac.net	9 <b>Q. Good morning. How are you doing?</b>
10	10 A. Not well.
11 FOR THE DEFENDANT:	11 <b>Q. Not well. We'll try to make this as</b>
12 BY: MICHAEL D. LEEDBERG, ESQ.	12 <b>painless as possible.</b>
13 PIERCE, DAVIS & PERRITANO, LLP	13 <b>My name is Matt Coletti, I represent</b>
14 Ten Winthrop Square	14 <b>the Plaintiffs in this action, and I'm just</b>
15 Boston, Massachusetts 02110-1257	15 <b>going to go through and ask you a few questions</b>
16 617-350-0950	16 <b>today.</b>
17 mleedberg@piercedavis.com	17 <b>Have you ever been deposed before?</b>
18	18 A. No.
19	19 <b>Q. It's a relatively simple process.</b>
20	20 <b>Again, all the attorneys here can ask</b>
21	21 <b>you questions if they choose, and you answer</b>
22	22 <b>them to the best of your abilities, what you can</b>
23	23 <b>remember. If you can't remember, you don't have</b>
24	24 <b>to guess, don't speculate, just tell us, you</b>
2	4
1 INDEX	1 know, what you can remember.
2 EXAMINATION PAGE	2 <b>It's best that you answer, you know,</b>
3 JONATHAN H. DOWSE	3 <b>simple question or no when possible, no nodding,</b>
4 BY MR. COLETTI 4	4 <b>no hand gestures.</b>
5 BY MR. LEEDBERG 38	5 A. Correct.
6 BY MR. COLETTI 40	6 <b>Q. Exactly.</b>
7	7 <b>And just try not to speak over each</b>
8 EXHIBITS	8 <b>other if possible, don't anticipate what the</b>
9 NO. DESCRIPTION PAGE	9 <b>rest of my question will be, and it should make</b>
10 1 Users' manual..... 14	10 <b>it easier for the stenographer.</b>
11 2 Document..... 35	11 <b>So could you just spell your name for</b>
12	12 <b>the record, please?</b>
13 <b>**EXHIBITS RETAINED BY ATTORNEY COLETTI**</b>	13 A. Yes. Jonathan, J-O-N-A-T-H-A-N,
14	14 Dowse, D-O-W-S-E.
15	15 <b>Q. And what is your current address?</b>
16	16 A. 100 North Main Street, Sherborn, Mass,
17	17 01770.
18	18 <b>Q. Your date of birth?</b>
19	19 A. 9-23-62.
20	20 <b>Q. Age?</b>
21	21 A. Now you're going to put me on the
22	22 spot.
23	23 Forty-four.
24	24 <b>Q. Social Security number?</b>
3	5

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Jonathan H. Dowse

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<p>1 A. 032-38-4087.</p> <p>2 <b>Q. Are you currently taking any</b></p> <p>3 <b>medications, anything for your health that could</b></p> <p>4 <b>possibly affect --</b></p> <p>5 A. No.</p> <p>6 <b>Q. Are you married?</b></p> <p>7 A. Yes.</p> <p>8 <b>Q. And any children?</b></p> <p>9 A. Yes.</p> <p>10 <b>Q. How many?</b></p> <p>11 A. Two.</p> <p>12 <b>Q. Sons, daughters?</b></p> <p>13 A. Son and a daughter.</p> <p>14 <b>Q. Age?</b></p> <p>15 A. The girl is seven, and the boy is</p> <p>16 four.</p> <p>17 <b>Q. That's a good time. That's nice.</b></p> <p>18 <b>How about your educational background;</b></p> <p>19 <b>are you a high school graduate?</b></p> <p>20 A. Yes. I have a high school degree in a</p> <p>21 vocational school, and I have an associates</p> <p>22 degree in plant and soil sciences.</p> <p>23 <b>Q. And the degree granting institution</b></p> <p>24 <b>for the associates degree?</b></p> <p style="text-align: right;">6</p>	<p>1 A. Yes, it is.</p> <p>2 <b>Q. So no prior formal occupations apart</b></p> <p>3 <b>from that?</b></p> <p>4 A. No. I've done the fire department for</p> <p>5 over twenty years, odds and end jobs to</p> <p>6 supplement the farm income.</p> <p>7 <b>Q. And in your twenty years in the fire</b></p> <p>8 <b>department -- the Sherborn Fire Department?</b></p> <p>9 A. Correct.</p> <p>10 <b>Q. Could you discuss chronologically,</b></p> <p>11 <b>starting with the most recent, your roles that</b></p> <p>12 <b>you've had in the department?</b></p> <p>13 A. Starting with recent, I'm currently</p> <p>14 the deputy chief of the department, and I</p> <p>15 oversee the inspections, training, fire and</p> <p>16 rescue operations.</p> <p>17 Prior to that I was the captain of</p> <p>18 Squad 1, which was -- at that time it was this</p> <p>19 station here which I had the ambulance, the</p> <p>20 Engine 4, which is our heavy rescue that carries</p> <p>21 the jaws, the backup medical equipment, not a</p> <p>22 transport piece, but it's what we call heavy</p> <p>23 rescue.</p> <p>24 And then prior to that I was a</p> <p style="text-align: right;">8</p>
<p>1 A. UMass Amherst, Stockward School of</p> <p>2 Agriculture.</p> <p>3 <b>Q. Did you serve in the military?</b></p> <p>4 A. Yes. I spent eight years in the Army</p> <p>5 Reserves.</p> <p>6 <b>Q. Nice.</b></p> <p>7 <b>Could you tell us quickly your current</b></p> <p>8 <b>occupation?</b></p> <p>9 A. Farmer, I guess.</p> <p>10 <b>Q. Farmer.</b></p> <p>11 A. Farmer, vice-president of a</p> <p>12 corporation, farmer, all the same thing.</p> <p>13 <b>Q. Is it the Dowse Orchards up the street</b></p> <p>14 <b>there?</b></p> <p>15 A. Yes.</p> <p>16 <b>Q. I drove by it and I thought there may</b></p> <p>17 <b>be some relation.</b></p> <p>18 A. There is. That's my family's farm.</p> <p>19 <b>Q. And how long have you been doing that?</b></p> <p>20 A. All my life.</p> <p>21 <b>Q. All your life.</b></p> <p>22 <b>Primary occupation?</b></p> <p>23 A. Yes.</p> <p>24 <b>Q. Busy time of the year for you?</b></p> <p style="text-align: right;">7</p>	<p>1 lieutenant on Engine 2 which was our reel truck,</p> <p>2 our water supply.</p> <p>3 I've been an EMT on the department. I</p> <p>4 became an EMT, I believe, in '89, and I've been</p> <p>5 an EMT -- got my EMT license in '83, 1983.</p> <p>6 <b>Q. And for how long have you been the</b></p> <p>7 <b>deputy chief of the department?</b></p> <p>8 A. I think about three years.</p> <p>9 <b>Q. So approximately 2003 at some point?</b></p> <p>10 A. Yes, I believe. I have to look. I</p> <p>11 can't remember.</p> <p>12 <b>Q. So prior to that, then, were you</b></p> <p>13 <b>captain of Squad 1?</b></p> <p>14 A. Yes, that's correct. I was captain of</p> <p>15 Squad 1, and I'm going to say I held that</p> <p>16 position for -- since about '96 or '97.</p> <p>17 <b>Q. So 1996 to about 2003?</b></p> <p>18 A. Yes.</p> <p>19 <b>Q. And you said that included -- I'm</b></p> <p>20 <b>sorry. Strike that.</b></p> <p>21 <b>And lieutenant on Engine 2, that was</b></p> <p>22 <b>prior to 1996?</b></p> <p>23 A. Correct. I think I was promoted to</p> <p>24 lieutenant roughly '91 or '92. I think it was a</p> <p style="text-align: right;">9</p>

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<p>1 little bit later than that.</p> <p>2 <b>Q. So it's fair to say that while you</b></p> <p>3 <b>were a captain of the Squad 1, the incident that</b></p> <p>4 <b>we're here for today in February of 2002</b></p> <p>5 <b>occurred during that time, 2003?</b></p> <p>6 A. It was, I believe it was February of</p> <p>7 2003, and I was -- we were in the transition, I</p> <p>8 had just started as the deputy chief, so I was</p> <p>9 helping the person taking over. Actually I</p> <p>10 don't think we had filled the captain's position</p> <p>11 yet at that point.</p> <p>12 <b>Q. So at that time would you have</b></p> <p>13 <b>characterized yourself as the deputy chief or</b></p> <p>14 <b>the captain?</b></p> <p>15 A. I was the deputy chief. I was still</p> <p>16 doing some of my captain roles.</p> <p>17 <b>Q. What exactly were those roles?</b></p> <p>18 A. Working with the EMS lieutenant, I</p> <p>19 would oversee the running of the ambulance,</p> <p>20 stocking, restocking of supplies, any</p> <p>21 maintenance that came up with the vehicle, or</p> <p>22 equipment in the ambulance, keeping aware of</p> <p>23 OEMS regulations, Office of Emergency Medical</p> <p>24 Services, and any changes in policies and stuff</p> <p style="text-align: right;">10</p>	<p>1 and started to do an inspection of the</p> <p>2 stretcher.</p> <p>3 <b>Q. What did that inspection consist of?</b></p> <p>4 A. Primarily it started off with</p> <p>5 operations, you know, see if it was working</p> <p>6 properly, which at that time it was not.</p> <p>7 <b>Q. What led you to conclude that it was</b></p> <p>8 <b>not working properly?</b></p> <p>9 A. I had pulled it out of the back of the</p> <p>10 box, I went to reload it back into the box and I</p> <p>11 could not get the wheels to go up on the</p> <p>12 stretcher to reload it in the box, being the</p> <p>13 ambulance, sorry.</p> <p>14 <b>Q. Did you examine what could be causing</b></p> <p>15 <b>the wheels not to --</b></p> <p>16 A. At that point in time I did. I</p> <p>17 removed the stretcher off the top to look at the</p> <p>18 mechanisms, and I did discover a flat piece of</p> <p>19 metal connected, I believe it was connected to</p> <p>20 the handle, to be bent.</p> <p>21 <b>Q. When you say "to be bent," do you mean</b></p> <p>22 <b>that it was bent itself, that it had to be bent</b></p> <p>23 <b>back?</b></p> <p>24 A. Yes, it was bent itself.</p> <p style="text-align: right;">12</p>
<p>1 like that, and reviewing with the lieutenant of</p> <p>2 calls.</p> <p>3 <b>Q. So at the time of the incident,</b></p> <p>4 <b>February, 2003, this fire department here in the</b></p> <p>5 <b>Town of Sherborn only had one ambulance,</b></p> <p>6 <b>correct?</b></p> <p>7 A. Correct.</p> <p>8 <b>Q. And that's the one that you're</b></p> <p>9 <b>referring to when you said that --</b></p> <p>10 A. Yes.</p> <p>11 <b>Q. Okay. Around the time of the</b></p> <p>12 <b>incident, how did you first learn of what</b></p> <p>13 <b>occurred?</b></p> <p>14 A. I don't recall. I did find out the</p> <p>15 next morning, but I don't recall how I was --</p> <p>16 learned of the incident.</p> <p>17 <b>Q. Can you recall whether it was by</b></p> <p>18 <b>phone, through conversation, by fax?</b></p> <p>19 A. Someone reported to me, exactly how I</p> <p>20 don't recall. But once I had received</p> <p>21 notification, I came right down.</p> <p>22 <b>Q. And what did you do when you came</b></p> <p>23 <b>down?</b></p> <p>24 A. I came down, pulled the stretcher out,</p> <p style="text-align: right;">11</p>	<p>1 <b>Q. If I were to give you a piece of</b></p> <p>2 <b>paper, do you think you could illustrate</b></p> <p>3 <b>possibly how you think you --</b></p> <p>4 A. I'd have to -- it was so long ago and</p> <p>5 I deal with so much broken equipment, I'd have</p> <p>6 to physically look at the stretcher, I could</p> <p>7 show you on the stretcher itself.</p> <p>8 <b>Q. In dealing with broken equipment, are</b></p> <p>9 <b>you referring to equipment in this department?</b></p> <p>10 A. Department, farm. You know, I'm a</p> <p>11 farmer, I'm a jack of all trades.</p> <p>12 <b>Q. So would you say this was the first</b></p> <p>13 <b>time in this department that you had seen this</b></p> <p>14 <b>type of malfunction?</b></p> <p>15 A. Yes.</p> <p>16 <b>Q. When you say you discovered the flat</b></p> <p>17 <b>piece of metal, where exactly on the stretcher,</b></p> <p>18 <b>can you describe?</b></p> <p>19 A. Yes. It was up by the locking</p> <p>20 mechanism for the stretcher.</p> <p>21 <b>Q. This is an exhibit we've used in</b></p> <p>22 <b>previous depositions, it's a users' manual for</b></p> <p>23 <b>the stretcher previously cited as Exhibit Number</b></p> <p>24 <b>4 in Scott Christianson's deposition. I'm going</b></p> <p style="text-align: right;">13</p>

4 (Pages 10 to 13)



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<p>1 to show it to you briefly, and your attorney can 2 take a look. I'm sure he's familiar with it 3 (handing). 4 MR. LEEDBERG: Do you want him to flip 5 through it? Do you want to give us the marked 6 one and give you the copy back? 7 MR. COLETTI: Yes, that's fine. 8 BY MR. COLETTI: 9 <b>Q. I'm going to ask you some questions,</b> 10 <b>and the pages here are marked.</b> 11 A. Okay. 12 <b>Q. In looking at the stretcher there, the</b> 13 <b>diagram, could you indicate where on the</b> 14 <b>diagram?</b> 15 A. On this diagram the lever that's 16 marked "auxiliary lock" would have been the 17 piece that I'm referring to. 18 <b>Q. Auxiliary lock.</b> 19 MR. COLETTI: Do you mind if I just 20 have this marked as Exhibit 1, please? 21 (Whereupon, J. Dowse Exhibit 1 was 22 marked for identification.) 23 MR. COLETTI: Just for the record, the 24 diagram to which the witness is referring is</p> <p style="text-align: right;">14</p>	<p>1 into the box, yes. 2 BY MR. COLETTI: 3 <b>Q. So the stretcher, then, was stuck in</b> 4 <b>one position?</b> 5 MR. LEEDBERG: Objection as to form. 6 You can answer if you can. 7 A. I was not able to unload the stretcher 8 at that time, yes. 9 BY MR. COLETTI: 10 <b>Q. And why is that?</b> 11 A. You need to use the unlocking 12 mechanism to get the wheels to collapse, come 13 up, and where I could not unlock it when it was 14 stuck in that position I could not get the 15 wheels to come up. 16 <b>Q. Okay. And what steps, if any, then</b> 17 <b>did you next take?</b> 18 A. I first pulled the ambulance out of 19 service where I did not have a stretcher. I was 20 able to remove, to remove this piece. And I 21 went down to the highway department, and with 22 the assistance of the town mechanic we were able 23 to straighten this lever up, then I reinstalled 24 it back into the stretcher, and the stretcher</p> <p style="text-align: right;">16</p>
<p>1 page seven of the previously cited users' 2 manual. 3 BY MR. COLETTI: 4 <b>Q. Are you able in looking at this</b> 5 <b>diagram to tell us any more about the condition</b> 6 <b>of the -- I'm sorry, just the diagram on page</b> 7 <b>seven there.</b> 8 A. I just want to look through here 9 quickly to see if there's a better -- on page 10 nine, figure D, it shows the lever that kind of 11 goes through and goes up over and how it 12 unlocks, and that piece was actually bent 13 downwards. 14 <b>Q. When you say "bent downwards," do you</b> 15 <b>mean bent down to the ground, facing the ground?</b> 16 A. Facing the ground, probably about a 40 17 to 50 degree angle. 18 <b>Q. And you concluded that this was the</b> 19 <b>cause of the malfunction?</b> 20 MR. LEEDBERG: Objection to the form. 21 Go ahead and answer, Jon. 22 A. This -- for what I was trying to do, 23 put the stretcher back in the ambulance, this 24 was the reason why I could not get it to go back</p> <p style="text-align: right;">15</p>	<p>1 appeared to be functioning fine. 2 <b>Q. And the town mechanic's name?</b> 3 A. Warren Wheelwright -- Warren Donnelly, 4 I'm getting my Warren's mixed up. He'd shoot me 5 if I said that. Warren Donnelly. 6 <b>Q. So you said that you had taken it to</b> 7 <b>him and you both had straightened it out.</b> 8 <b>Could you describe more specifically</b> 9 <b>the process that may have been taken?</b> 10 A. I think we just put it on a vise and 11 carefully straightened it out, because I didn't 12 have a vise here to do it. I believe pretty 13 much, best of my knowledge, is that we put it in 14 a vise and carefully straightened it out not to 15 further damage or weaken the piece. 16 <b>Q. And did you at that time test it to</b> 17 <b>make sure that it worked properly?</b> 18 A. Yes, I did, when I, you know, when I 19 brought it back to the station and put it back 20 into the stretcher, and I did go through all the 21 functions with it. 22 <b>Q. And it worked properly?</b> 23 A. Yes. 24 <b>Q. During the course of these events,</b></p> <p style="text-align: right;">17</p>

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<p>1 <b>your inspection of the device, did you have any</b>  2 <b>conversations with anyone in the department</b>  3 <b>about it?</b>  4 A. I think the chief, Pam Dowse, and Ron  5 Buckler, people we discussed the --  6 <b>Q. With respect to the chief, do you</b>  7 <b>remember the content of the conversation that</b>  8 <b>you may have had with him?</b>  9 A. I think I was just advising him that  10 we had the issue with it, I found something  11 wrong with it, and that I have taken the  12 corrective measures. Just kept telling him what  13 was going on.  14 <b>Q. Did you suggest any corrective</b>  15 <b>measures?</b>  16 A. Pam and myself contacted Ferno and got  17 in touch with their authorized service company,  18 I think you guys have it, which is EMRS, I  19 believe it was.  20 MR. LEEDBERG: EMSAR?  21 A. EMSAR, and we made arrangements to  22 have them come out and go through the stretcher  23 completely the first chance, I think it was the  24 beginning of the next week. Because I believe</p> <p style="text-align: right;">18</p>	<p>1 <b>their inspections?</b>  2 A. They went through, they lubricated all  3 the joints, if I recall, examined the part, I  4 don't know if they actually replaced the part or  5 not, but I showed them what piece I had found  6 that was bent and asked them to closely look at  7 that, and did their routine maintenance, which  8 we've been performing ever since.  9 <b>Q. Had you been performing it prior to</b>  10 <b>the incident?</b>  11 A. No.  12 <b>Q. Had you done anything to routinely</b>  13 <b>maintain the stretcher prior to the incident?</b>  14 A. The only maintenance that I'm aware of  15 on the stretcher prior to this was replacement  16 of wear guards on the legs of the wheels.  17 <b>Q. You performed checks on supplies of</b>  18 <b>the ambulances frequently, correct?</b>  19 A. Correct.  20 <b>Q. In doing those supply checks, you made</b>  21 <b>sure there was a stretcher there, correct?</b>  22 A. Yes.  23 <b>Q. And did you do anything more other</b>  24 <b>than -- strike that.</b></p> <p style="text-align: right;">20</p>
<p>1 the incident happened on a Thursday night, and  2 that was a Friday.  3 BY MR. COLETTI:  4 <b>Q. And Pam Dowse, your wife?</b>  5 A. Yes.  6 <b>Q. What's her role in the department?</b>  7 A. She was the administrator at the time,  8 and the lieutenant of the ambulance.  9 <b>Q. And do you recall the content of any</b>  10 <b>conversations you may have had with her</b>  11 <b>regarding the incident?</b>  12 A. No, I don't, other than finding  13 something wrong with it and what we wanted to do  14 to correct it.  15 <b>Q. And your conversations with Ron</b>  16 <b>Buckler, do you recall the content of those?</b>  17 A. The same thing as the chief, keeping  18 everybody in the loop and course of action we  19 were planning to do. Ron was the deputy chief  20 of the ambulance at that time.  21 <b>Q. When the service company, EMSAR, came</b>  22 <b>out, were you present for their inspections?</b>  23 A. Yes, I was.  24 <b>Q. What did they do during the course of</b></p> <p style="text-align: right;">19</p>	<p>1 <b>In doing your supply checks of the</b>  2 <b>ambulance, were there any more specific checks</b>  3 <b>of the stretcher done?</b>  4 A. Generally most people would pull the  5 stretcher out, examine the stretcher looking for  6 blood or fluids or dirt on the stretcher, and  7 cleaning of the stretcher would be a normal task  8 in doing an inventory of the ambulance.  9 <b>Q. Would you in doing an inventory of the</b>  10 <b>ambulance glance over the structure or the</b>  11 <b>devices of the structure?</b>  12 A. Yes. As I said, you're looking for  13 blood, so you're looking at the handrails and  14 stuff like that. It would have been a quick  15 visual.  16 <b>Q. When EMSAR was inspecting or doing --</b>  17 <b>performing their maintenance on the stretcher,</b>  18 <b>was there any discussion as to the possible</b>  19 <b>causes of the bent device?</b>  20 A. Yes, and no explanation was able to be  21 given.  22 <b>Q. Were any possible causes discussed?</b>  23 A. I'm trying to remember. I think we  24 did discuss it, but we were both puzzled on how</p> <p style="text-align: right;">21</p>

6 (Pages 18 to 21)

<p>1 it could have gotten bent.</p> <p>2 <b>Q. Did they, did EMSAR remove the</b></p> <p>3 <b>stretcher from service for a period of time?</b></p> <p>4 A. No.</p> <p>5 <b>Q. So they didn't physically remove it</b></p> <p>6 <b>from the property to inspect it?</b></p> <p>7 A. No. Everything was done right here in</p> <p>8 the station.</p> <p>9 MR. COLETTI: Do you mind if we took a</p> <p>10 brief break just for five minutes or so?</p> <p>11 MR. LEEDBERG: No.</p> <p>12 (Whereupon, a recess was taken from</p> <p>13 11:21 a.m. to 11:24 a.m.)</p> <p>14 BY MR. COLETTI:</p> <p>15 <b>Q. A few more questions, but we will get</b></p> <p>16 <b>you out of here within the hour.</b></p> <p>17 A. All right.</p> <p>18 <b>Q. How familiar would you say you are</b></p> <p>19 <b>with the stretchers themselves and the</b></p> <p>20 <b>functioning of them?</b></p> <p>21 A. I've been dealing with this style</p> <p>22 stretcher for almost twenty years, so I feel</p> <p>23 very comfortable with the operations of it and</p> <p>24 its functions.</p> <p style="text-align: right;">22</p>	<p>1 assimilate loading from the back of the box, and</p> <p>2 you would never do this with a patient on the</p> <p>3 stretcher, you do it empty, where you put it to</p> <p>4 the load position, and then the head operator</p> <p>5 actually takes the wheels and pushes it back</p> <p>6 underneath the stretcher to lower it all the way</p> <p>7 down to the ground.</p> <p>8 <b>Q. Could I ask you to turn to page seven</b></p> <p>9 <b>of the users' manual, please, marked as Exhibit</b></p> <p>10 <b>1?</b></p> <p>11 <b>And in focusing on what we'll call the</b></p> <p>12 <b>legs of the stretcher, the four --</b></p> <p>13 A. The undercarriage.</p> <p>14 <b>Q. Okay. Could you describe in detail</b></p> <p>15 <b>how it is that those parts move during the</b></p> <p>16 <b>raising and lowering process, if at all?</b></p> <p>17 A. During the raising and lowering</p> <p>18 process, as you look at your diagram, outside</p> <p>19 the box with a patient on it, basically if you</p> <p>20 look you see the bars come down to sleeves that</p> <p>21 are over the four legs, in a sense, of the</p> <p>22 undercarriage, and that basically they slide up</p> <p>23 and down on that. I believe the front part of</p> <p>24 the undercarriage or the head end of the</p> <p style="text-align: right;">24</p>
<p>1 <b>Q. Could you describe for us in detail</b></p> <p>2 <b>the process by which the stretcher raises and</b></p> <p>3 <b>lowers?</b></p> <p>4 A. Okay. In detail, this particular</p> <p>5 model stretcher, you need to have -- coming out</p> <p>6 of the back of the box, you pull it out, as I</p> <p>7 train people, you pull it out of the box, you</p> <p>8 wait for the wheels to click, and they'll drop</p> <p>9 down, down, click in. Upon coming out of the</p> <p>10 back of the box you want to level off the</p> <p>11 stretcher, because the head will be slightly</p> <p>12 elevated, so you level off the stretcher, and</p> <p>13 that requires someone up at the head. There's</p> <p>14 two levers, one at the foot and one at the head,</p> <p>15 both on the right-hand side as you're facing the</p> <p>16 stretcher. And generally to raise and lower the</p> <p>17 stretcher you need to squeeze both handles</p> <p>18 together, and pick up slightly and then lower it</p> <p>19 down to the desired position.</p> <p>20 Coming out of the back of the box, you</p> <p>21 can only go to a certain point, I think it's</p> <p>22 about twelve inches or sixteen inches off the</p> <p>23 ground. To get the stretcher to go all the way</p> <p>24 down to the ground you actually have to</p> <p style="text-align: right;">23</p>	<p>1 stretcher will actually slide down just a little</p> <p>2 bit to keep it centered underneath the</p> <p>3 stretcher. And you've got two or three</p> <p>4 positions, and you cannot go all the way down to</p> <p>5 the ground in that position there.</p> <p>6 <b>Q. So then how does the auxiliary lock or</b></p> <p>7 <b>the lever --</b></p> <p>8 A. The auxiliary lock, what the auxiliary</p> <p>9 lock does, it's only good for when you're</p> <p>10 loading the stretcher in the back of the</p> <p>11 ambulance. You have to unlock it to load it</p> <p>12 into the back of the box.</p> <p>13 <b>Q. Does the auxiliary lock and devices</b></p> <p>14 <b>accompanying it affect the movement of the</b></p> <p>15 <b>undercarriage in the raising and lowering</b></p> <p>16 <b>process?</b></p> <p>17 A. The auxiliary lock is for when you're</p> <p>18 going to load it in the back, and what it does</p> <p>19 is both these wheels come up all the way to the</p> <p>20 back of the stretcher, and coming underneath it,</p> <p>21 so the stretcher is flat down on the surface</p> <p>22 generally in the back of the box.</p> <p>23 <b>Q. When the stretcher is not occupied,</b></p> <p>24 <b>how quickly can one raise and lower it?</b></p> <p style="text-align: right;">25</p>

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<p>1 A. You actually need two people to raise 2 and lower it. You can't do it yourself. I can 3 load it in the back of the box by myself, but 4 that's about it, or unload it.</p> <p>5 <b>Q. If two people were to use the 6 stretcher in the way that it's intended, one 7 person on each end with access to the auxiliary 8 locks to raise and lower it, how fast could they 9 raise and lower the stretcher from its lowest 10 position to its highest position?</b></p> <p>11 MR. LEEDBERG: Objection as to form. 12 Answer if you understand the question, 13 Jon.</p> <p>14 A. It's tough to say. I mean with a 15 person on the back? With nobody on the 16 stretcher or with somebody on the stretcher?</p> <p>17 BY MR. COLETTI:</p> <p>18 <b>Q. We could answer both. So first no one 19 on the stretcher.</b></p> <p>20 A. With nobody on the stretcher, it's 21 light, so you could probably do it in about 22 three or four seconds.</p> <p>23 <b>Q. And if the stretcher were occupied?</b> 24 A. You're going to have some weight to</p> <p style="text-align: right;">26</p>	<p>1 quarter inch, but I don't totally recall.</p> <p>2 <b>Q. And do you recall how difficult or 3 easy it was to bend the bar back to its original 4 shape?</b></p> <p>5 MR. LEEDBERG: I'm going to object as 6 to form.</p> <p>7 Answer if you can, Jon.</p> <p>8 A. I think it's a flat piece of metal. 9 It wasn't very difficult.</p> <p>10 BY MR. COLETTI:</p> <p>11 <b>Q. And you said it was done in a vise?</b> 12 A. A clamp, a vise at the highway 13 department.</p> <p>14 <b>Q. And was the bending, the physical 15 bending of the bar, was that performed by 16 yourself or Warren Donnelly?</b></p> <p>17 A. I don't recall who exactly.</p> <p>18 <b>Q. But did it require one person or both?</b> 19 A. It just required one person.</p> <p>20 <b>Q. Did you perform any inspections 21 afterward of the stretcher during its routine 22 use?</b></p> <p>23 A. After, as I said, we contacted EMSAR 24 to do a yearly servicing of it, and, you know,</p> <p style="text-align: right;">28</p>
<p>1 it, so you're going to go -- probably going to 2 take you eight to ten seconds.</p> <p>3 <b>Q. And you're talking about raising it, 4 correct?</b></p> <p>5 A. Raising or even lowering it.</p> <p>6 <b>Q. So would you say that the 7 undercarriage devices which raise and lower the 8 stretcher would move more quickly if there were 9 a person on the stretcher?</b></p> <p>10 A. Yes. You've got more weight, gravity.</p> <p>11 <b>Q. Could you estimate for us the force 12 with which a person on the stretcher -- sorry. 13 Strike the question.</b></p> <p>14 <b>In removing the stretcher from the 15 box, as you say, and when it's occupied, does 16 that affect the functioning of the undercarriage 17 in any way as opposed to if it was unoccupied?</b></p> <p>18 A. No.</p> <p>19 <b>Q. I'm going to revisit that later and 20 move on for the time.</b></p> <p>21 <b>In examining the piece of metal with 22 both EMSAR and Warren Donnelly, could you 23 describe how thick it was, the bar?</b> 24 A. I'm going to say I believe it was a</p> <p style="text-align: right;">27</p>	<p>1 just keep an eye on it, make sure it's 2 functioning properly.</p> <p>3 <b>Q. So in that period of time afterward, 4 did you notice the bar bending back to its 5 malfunctioning shape at any point?</b></p> <p>6 A. No.</p> <p>7 <b>Q. Earlier, I don't know if you recall 8 you had made mention of a practice that you 9 would never do with a patient on. I think you 10 may have been referring to the raising and 11 lowering of the stretcher.</b></p> <p>12 A. What I was referring to was if I 13 wanted to put the stretcher down to the ground 14 for a motor vehicle accident or something like 15 that where I had someone low and I wanted to go 16 straight from the car right onto the stretcher 17 with a backboard or something like that.</p> <p>18 <b>Q. And is there a reason why you wouldn't 19 lower the stretcher to the ground?</b></p> <p>20 A. With a patient on it there is 21 absolutely no reason for me to do that. The 22 only time I would do that is to put a patient 23 onto it that's maybe real large or something 24 like that, real close to the ground, or, as I</p> <p style="text-align: right;">29</p>

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<p>1 said, the MVA where I've got a backboard coming 2 out of a car or transferring a patient out of a 3 car, I want to go straight onto the stretcher to 4 keep the backboard level.</p> <p>5 <b>Q. What kind of risks would there be for</b> 6 <b>a person who was on the stretcher if it were to</b> 7 <b>be lowered to the ground?</b></p> <p>8 MR. LEEDBERG: Objection as to form. 9 Go ahead and answer if you can.</p> <p>10 A. As I said, there is absolutely no 11 reason to do that. It's not an easy task to do 12 it, and there's absolutely no reason to do that. 13 Once I have a patient on the stretcher, they're 14 going to the hospital and generally transferred 15 to a hospital bed at the same height of the 16 stretcher.</p> <p>17 BY MR. COLETTI:</p> <p>18 <b>Q. Could I refer you to page eleven of</b> 19 <b>the Exhibit 1, please?</b></p> <p>20 <b>Could you describe for us of the</b> 21 <b>positions you see on page eleven the condition</b> 22 <b>of the stretcher when you first saw it?</b></p> <p>23 A. The folded position.</p> <p>24 <b>Q. And in the folded position, how far</b></p> <p style="text-align: right;">30</p>	<p>1 A. I'm going to say roughly, you know, 36 2 inches.</p> <p>3 <b>Q. Thirty-six inches.</b></p> <p>4 A. That's just an estimate.</p> <p>5 <b>Q. Do you have an understanding as to how</b> 6 <b>the bent auxiliary lock affected the removal of</b> 7 <b>the stretcher when the Plaintiff was taken out</b> 8 <b>of the ambulance at the hospital?</b></p> <p>9 MR. LEEDBERG: Objection as to form. 10 Go ahead and answer, if you can.</p> <p>11 A. No.</p> <p>12 BY MR. COLETTI:</p> <p>13 <b>Q. Is it possible that a bent auxiliary</b> 14 <b>lock could affect the functioning of the</b> 15 <b>stretcher when removing it from the box?</b></p> <p>16 MR. LEEDBERG: Objection as to form. 17 Go ahead and answer if you can, Jon.</p> <p>18 A. I don't believe so.</p> <p>19 BY MR. COLETTI:</p> <p>20 <b>Q. On what do you base your belief that</b> 21 <b>it would not be affected?</b></p> <p>22 MR. LEEDBERG: Objection as to form. 23 Go ahead and answer, Jon.</p> <p>24 A. My belief is the fact that I couldn't</p> <p style="text-align: right;">32</p>
<p>1 <b>from the ground would you say the cushion of the</b> 2 <b>stretcher is?</b></p> <p>3 A. In the folded position, I'm going to 4 say approximately six inches.</p> <p>5 <b>Q. And normally the stretcher in its</b> 6 <b>functioning position at its highest point is</b> 7 <b>either -- is in the loaded position?</b></p> <p>8 MR. LEEDBERG: I'm going to object as 9 to form. 10 Answer if you understand the question, 11 Jon.</p> <p>12 A. The only difference between the high 13 level and the loading position is the front's 14 elevated a little bit more just to get the front 15 wheels up onto the back of the box. That's the 16 only difference.</p> <p>17 BY MR. COLETTI:</p> <p>18 <b>Q. And is that the same height when</b> 19 <b>removing it from the back of the box?</b></p> <p>20 A. Completely outside the back of the box 21 would be what we call the loading position.</p> <p>22 <b>Q. And how high from the ground would you</b> 23 <b>estimate the top of the stretcher cushion is in</b> 24 <b>the loading position?</b></p> <p style="text-align: right;">31</p>	<p>1 get the wheels to unlock when I pulled it out of 2 the back, so that means it would have performed 3 like that. So that's used only for more loading 4 of the stretcher into the back of the box than 5 any other function.</p> <p>6 BY MR. COLETTI:</p> <p>7 <b>Q. So it's not used in removing the</b> 8 <b>stretcher?</b></p> <p>9 A. It's not used in removing of the 10 patient from the back.</p> <p>11 <b>Q. Do you have an opinion as to whether</b> 12 <b>the auxiliary lock could be bent by hand?</b></p> <p>13 A. No, I don't think so.</p> <p>14 MR. LEEDBERG: Are we talking about 15 the auxiliary lock lever?</p> <p>16 BY MR. COLETTI:</p> <p>17 <b>Q. The lever that you inspected with</b> 18 <b>Warren Donnelly.</b></p> <p>19 MR. LEEDBERG: You said auxiliary 20 lock.</p> <p>21 MR. COLETTI: I'm sorry.</p> <p>22 A. No, it would have taken quite a bit of 23 force.</p> <p>24 BY MR. COLETTI:</p> <p style="text-align: right;">33</p>



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<p>1 <b>Q. To bend it by hand?</b></p> <p>2 A. Yes.</p> <p>3 <b>Q. Is there anything that you could</b></p> <p>4 <b>compare the bar that you inspected to, a common</b></p> <p>5 <b>item maybe?</b></p> <p>6 A. Something easy, like a butter knife or</p> <p>7 something like that.</p> <p>8 <b>Q. In width?</b></p> <p>9 A. That's probably not a good. Nothing I</p> <p>10 can really compare it to.</p> <p>11 (Pause.)</p> <p>12 BY MR. COLETTI:</p> <p>13 <b>Q. I'm going to show you a list of</b></p> <p>14 <b>preventive maintenance guidelines followed by</b></p> <p>15 <b>EMSAR.</b></p> <p>16 <b>Would you mind taking a minute to</b></p> <p>17 <b>review it, please, if you could (handing)?</b></p> <p>18 MR. LEEDBERG: I'm going to object. I</p> <p>19 doesn't necessarily agree with your</p> <p>20 characterization of the document.</p> <p>21 But go ahead and review the document.</p> <p>22 (Witness reviewing document.)</p> <p>23 MR. LEEDBERG: Was this document</p> <p>24 produced? I don't recall seeing this. Do you</p> <p style="text-align: right;">34</p>	<p>1 preventive maintenance checks, a lot of this</p> <p>2 stuff is visual checks, and of course you're</p> <p>3 always doing a visual inspection of the</p> <p>4 stretcher. If you see a loose bolt or nut, it</p> <p>5 would have been corrected as seen.</p> <p>6 The only thing that we're not really</p> <p>7 doing is the -- that I was aware of, it might</p> <p>8 have been done, is lubrication of joints and</p> <p>9 hinges. There is no hydraulic pump or hoses</p> <p>10 involved with our stretcher.</p> <p>11 BY MR. COLETTI:</p> <p>12 <b>Q. On the second page of Exhibit 2 where</b></p> <p>13 <b>it says "confirm proper operation of stretcher,"</b></p> <p>14 <b>what do you feel that would include?</b></p> <p>15 A. Confirm proper operation of the</p> <p>16 stretcher, that the stretcher raises and lowers</p> <p>17 properly, locks into each position that it's</p> <p>18 designed to go to, and loads and unloads out of</p> <p>19 the back of the box appropriately.</p> <p>20 <b>Q. When you say it loads and unloads</b></p> <p>21 <b>properly, you're referring to the raising and</b></p> <p>22 <b>lowering of the devices?</b></p> <p>23 A. I refer to actually putting it in the</p> <p>24 back of the box and pulling it out of the back</p> <p style="text-align: right;">36</p>
<p>1 know what the source of this document is? Why</p> <p>2 don't we mark it anyway.</p> <p>3 MR. DURSO: I don't think we've got</p> <p>4 anything we didn't get from you.</p> <p>5 MR. LEEDBERG: Part of the manual</p> <p>6 maybe?</p> <p>7 MR. DURSO: It's either from you or</p> <p>8 the EMSAR guy that we did, it's one or the</p> <p>9 other, that's the only two sources we have.</p> <p>10 MR. LEEDBERG: Fair enough. Could be</p> <p>11 in the file, it's a big file.</p> <p>12 MR. COLETTI: Could you please mark</p> <p>13 that as Exhibit 2?</p> <p>14 (Whereupon, Dowse Exhibit 2 was marked</p> <p>15 for identification.)</p> <p>16 BY MR. COLETTI:</p> <p>17 <b>Q. In reviewing this list, do you see any</b></p> <p>18 <b>practices that the department also performed on</b></p> <p>19 <b>the stretcher routinely, or at any point?</b></p> <p>20 MR. LEEDBERG: I'm going to object as</p> <p>21 to form.</p> <p>22 Go ahead and answer if you understand</p> <p>23 the question.</p> <p>24 A. I look at this as being a farmer and</p> <p style="text-align: right;">35</p>	<p>1 of the box.</p> <p>2 <b>Q. And that includes the raising and</b></p> <p>3 <b>lowering of the undercarriage, correct?</b></p> <p>4 A. Right.</p> <p>5 <b>Q. Are you able to tell us what controls</b></p> <p>6 <b>the rate of descent of the stretcher?</b></p> <p>7 MR. LEEDBERG: Objection as to form.</p> <p>8 Go ahead and answer if you can.</p> <p>9 A. The people handling it.</p> <p>10 BY MR. COLETTI:</p> <p>11 <b>Q. And what do you mean by "the people</b></p> <p>12 <b>handling it"?</b></p> <p>13 MR. LEEDBERG: Same objection.</p> <p>14 Go ahead and answer if you can, Jon.</p> <p>15 A. There is no pistons involved with</p> <p>16 this, so it's me and you on either end of the</p> <p>17 stretcher, how quickly we squeeze the handle and</p> <p>18 we let it go down.</p> <p>19 BY MR. COLETTI:</p> <p>20 <b>Q. So there's no device that provides any</b></p> <p>21 <b>traction or friction on the undercarriage?</b></p> <p>22 A. Correct.</p> <p>23 <b>Q. So the two people operating the</b></p> <p>24 <b>stretcher control the rate of descent?</b></p> <p style="text-align: right;">37</p>

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<p>1 A. Correct.</p> <p>2 MR. COLETTI: I don't think I have</p> <p>3 anything further.</p> <p>4 MR. LEEDBERG: I just want to clarify</p> <p>5 something.</p> <p>6 CROSS EXAMINATION</p> <p>7 BY MR. LEEDBERG:</p> <p>8 <b>Q. Jon, prior to this incident of</b></p> <p>9 <b>February, 2003, did the department regularly</b></p> <p>10 <b>check the functioning of the cot in any way?</b></p> <p>11 A. Yes.</p> <p>12 <b>Q. Could you describe for me how that was</b></p> <p>13 <b>done on the routine inventory of the ambulance?</b></p> <p>14 A. It would have been pulled out of the</p> <p>15 back of the box, and then from time to time with</p> <p>16 training of new personnel we would have been</p> <p>17 operating in the back teaching them how to</p> <p>18 properly use the stretcher, to raise, lower,</p> <p>19 unload and load the stretcher.</p> <p>20 <b>Q. And how often would the inventory</b></p> <p>21 <b>checks and/or, would you estimate, the training?</b></p> <p>22 A. Minimum of once a week, sometimes it</p> <p>23 would be done four or five times a week.</p> <p>24 <b>Q. Okay. And prior to the incident, did</b></p> <p style="text-align: right;">38</p>	<p>1 further questions.</p> <p>2 MR. DURSO: Just a couple more. Just</p> <p>3 give us a second, if you would.</p> <p>4 MR. LEEDBERG: Sure.</p> <p>5 (Whereupon, a recess was taken from</p> <p>6 11:47 a.m. to 11:49 o'clock a.m.)</p> <p>7 REDIRECT EXAMINATION</p> <p>8 BY MR. COLETTI:</p> <p>9 <b>Q. Just a few very short follow-up</b></p> <p>10 <b>questions, and we'll be done.</b></p> <p>11 A. All right.</p> <p>12 <b>Q. The auxiliary lock on the stretcher --</b></p> <p>13 <b>A. Yes.</b></p> <p>14 <b>Q. -- it locks the undercarriage into</b></p> <p>15 <b>place when pulling it out of the box, correct?</b></p> <p>16 MR. LEEDBERG: Objection as to form.</p> <p>17 Go ahead and answer, if you can, Jon.</p> <p>18 A. I'm not exactly positive its</p> <p>19 functions. I just know you have to unlock it</p> <p>20 to, I believe, you have to unlock it to release</p> <p>21 the wheels to go up.</p> <p>22 BY MR. COLETTI:</p> <p>23 <b>Q. So in removing the stretcher from the</b></p> <p>24 <b>box, a malfunctioning undercarriage or lock</b></p> <p style="text-align: right;">40</p>
<p>1 <b>you have any knowledge of any problem with the</b></p> <p>2 <b>cot functioning, this particular cot?</b></p> <p>3 A. No.</p> <p>4 <b>Q. Did the state also perform routine</b></p> <p>5 <b>inspections?</b></p> <p>6 A. Yes, the state did. The state</p> <p>7 inspection involves approximately about two to</p> <p>8 three hours in the back of the box looking at</p> <p>9 everything, including the stretcher.</p> <p>10 <b>Q. Would they check the functioning of</b></p> <p>11 <b>the stretcher?</b></p> <p>12 A. Yes, they would have us pull it out,</p> <p>13 they would actually have us lower and raise the</p> <p>14 stretcher.</p> <p>15 <b>Q. Okay. How long did you have this</b></p> <p>16 <b>particular cot before this incident of February,</b></p> <p>17 <b>2003?</b></p> <p>18 A. That cot was purchased with the</p> <p>19 ambulance. The ambulance was purchased in '97.</p> <p>20 <b>Q. Okay. And at any point prior to this</b></p> <p>21 <b>incident of February, 2003, did you have any</b></p> <p>22 <b>knowledge of any problem with the cot?</b></p> <p>23 A. No.</p> <p>24 MR. LEEDBERG: Okay. I have no</p> <p style="text-align: right;">39</p>	<p>1 <b>would prevent the undercarriage from dropping?</b></p> <p>2 MR. LEEDBERG: Objection as to form.</p> <p>3 Go ahead and answer, if you can, Jon.</p> <p>4 A. No. The wheels are already up. The</p> <p>5 lock prevents the wheels from going up when you</p> <p>6 go to load it in the stretcher. The wheels are</p> <p>7 already up, so it would allow the wheels to drop</p> <p>8 back down.</p> <p>9 BY MR. COLETTI:</p> <p>10 <b>Q. So the wheels automatically drop when</b></p> <p>11 <b>you remove it from the stretcher, correct?</b></p> <p>12 A. Correct.</p> <p>13 <b>Q. Would a bent auxiliary lock prevent</b></p> <p>14 <b>that from occurring?</b></p> <p>15 MR. LEEDBERG: Objection as to form.</p> <p>16 Go ahead and answer, if you can, Jon.</p> <p>17 A. No, it would not prevent the wheels</p> <p>18 from dropping.</p> <p>19 BY MR. COLETTI:</p> <p>20 <b>Q. The legs automatically lock when being</b></p> <p>21 <b>pulled from the box, correct?</b></p> <p>22 A. Correct. The auxiliary lock only</p> <p>23 allows you to put the stretcher, to put the</p> <p>24 stretcher all the way down to the load position,</p> <p style="text-align: right;">41</p>

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<p>1 that's the time that the auxiliary lock is used.</p> <p>2 <b>Q. Could you explain to us how the wheels</b></p> <p>3 <b>lock in place when being pulled from the box?</b></p> <p>4 MR. LEEDBERG: Could I just interject</p> <p>5 here?</p> <p>6 The cot is available for inspection.</p> <p>7 He's not an expert on the equipment. I mean if</p> <p>8 you want to go on with this line of questioning,</p> <p>9 that's fine, but just I'm not sure what it gets</p> <p>10 you. And I'm going to object to the whole line</p> <p>11 of questioning because he's not an expert on it.</p> <p>12 We have the cot available, if you guys want to</p> <p>13 notice a inspection we'll be more than happy to</p> <p>14 make it available to you.</p> <p>15 With that said, I'll object to the</p> <p>16 line of questioning.</p> <p>17 And you can go ahead and answer it,</p> <p>18 Jon, if you know, but don't guess.</p> <p>19 BY MR. COLETTI:</p> <p>20 <b>Q. Just to state for the record, again</b></p> <p>21 <b>you stated earlier you have approximately twenty</b></p> <p>22 <b>years experience in dealing with this type of</b></p> <p>23 <b>stretcher?</b></p> <p>24 A. Correct.</p> <p style="text-align: right;">42</p>	<p>1 MR. LEEDBERG: Objection.</p> <p>2 Go ahead.</p> <p>3 A. The auxiliary lock prevents you from</p> <p>4 putting the stretcher all the way down to the</p> <p>5 ground. For the wheels in the load position, if</p> <p>6 you look at page eleven of your manual, I'm</p> <p>7 talking the folded position here. The only way</p> <p>8 you can get into that position is you have to</p> <p>9 release the auxiliary lock. All the other</p> <p>10 positions are done by the handles.</p> <p>11 How it actually works inside, you have</p> <p>12 to ask Ferno itself. I've got twenty years, I</p> <p>13 understand the operations of the unit, not the</p> <p>14 making of the unit.</p> <p>15 MR. COLETTI: All right. Well, I</p> <p>16 thank you for your time today, and I have no</p> <p>17 further questions.</p> <p>18 MR. LEEDBERG: I have no questions.</p> <p>19 MR. DURSO: Thank you.</p> <p>20 (Whereupon, the deposition was</p> <p>21 concluded at 11:53 a.m.)</p> <p>22</p> <p>23</p> <p>24</p> <p style="text-align: right;">44</p>
<p>1 <b>Q. And you stated also that you're</b></p> <p>2 <b>familiar with its operations, and that you train</b></p> <p>3 <b>others in its use?</b></p> <p>4 A. Correct.</p> <p>5 MR. LEEDBERG: That doesn't</p> <p>6 necessarily mean he knows what happened and why</p> <p>7 it happens. He knows you've got to pull it out,</p> <p>8 and it clicks in place, he knows you've got to</p> <p>9 pull the auxiliary lock lever to pull it back</p> <p>10 in. Other than that, you're talking about an</p> <p>11 area of expertise that I'm not sure he has.</p> <p>12 I object to the line of questioning.</p> <p>13 I have no problem with you questioning, I object</p> <p>14 to the line of questioning. And go ahead. And</p> <p>15 I'll say again, we have the cot available for</p> <p>16 your inspection if you'd like.</p> <p>17 MR. COLETTI: Okay. We'll make a note</p> <p>18 for the record.</p> <p>19 BY MR. COLETTI:</p> <p>20 <b>Q. So again, the wheels lock into place</b></p> <p>21 <b>when you remove it from the box?</b></p> <p>22 A. Correct.</p> <p>23 <b>Q. Can you describe for us what role the</b></p> <p>24 <b>auxiliary lock plays in the wheels locking?</b></p> <p style="text-align: right;">43</p>	<p>1 ERRATA SHEET DISTRIBUTION INFORMATION</p> <p>2 DEPONENT'S ERRATA &amp; SIGNATURE INSTRUCTIONS</p> <p>3</p> <p>4 ERRATA SHEET DISTRIBUTION INFORMATION</p> <p>5 The original of the Errata Sheet has</p> <p>6 been delivered to Michael D. Leedberg, Esquire.</p> <p>7 When the Errata Sheet has been</p> <p>8 completed by the deponent and signed, a copy</p> <p>9 thereof should be delivered to each party of</p> <p>10 record and the ORIGINAL forwarded to Matthew P.</p> <p>11 Coletti, Esquire, to whom the original</p> <p>12 deposition transcript was delivered.</p> <p>13 INSTRUCTIONS TO DEPONENT</p> <p>14 After reading this volume of your</p> <p>15 deposition, please indicate any corrections or</p> <p>16 changes to your testimony and the reasons</p> <p>17 therefor on the Errata Sheet supplied to you and</p> <p>18 sign it. DO NOT make marks or notations on the</p> <p>19 transcript volume itself. Add additional sheets</p> <p>20 if necessary. Please refer to the above</p> <p>21 instructions for Errata Sheet distribution</p> <p>22 information.</p> <p>23</p> <p>24</p> <p style="text-align: right;">45</p>

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<p>1 ATTACH TO DEPOSITION OF JONATHAN H. DOWSE</p> <p>2 CASE: Koran v Weaver and Town of Sherborn</p> <p>3 DATE TAKEN: 10-17-06</p> <p>4 ERRATA SHEET</p> <p>5 Please refer to page 45 for errata sheet</p> <p>6 instructions and distribution instructions.</p> <p>7 PAGE LINE CHANGE REASON</p> <p>8 _____</p> <p>9 _____</p> <p>10 _____</p> <p>11 _____</p> <p>12 _____</p> <p>13 _____</p> <p>14 _____</p> <p>15 I have read the foregoing transcript</p> <p>16 of my deposition and except for any corrections</p> <p>17 or changes noted above, I hereby subscribe to</p> <p>18 the transcript as an accurate record of the</p> <p>19 statements made by me.</p> <p>20</p> <p>21 Executed this ____ day of _____, 2006.</p> <p>22</p> <p>23 _____</p> <p>24 JONATHAN H. DOWSE</p> <p style="text-align: right;">46</p>	
<p>1 COMMONWEALTH OF MASSACHUSETTS )</p> <p>2 SUFFOLK, SS. )</p> <p>3</p> <p>4 I, MAUREEN O'CONNOR POLLARD, RPR, CLR,</p> <p>5 and Notary Public in and for the Commonwealth of</p> <p>6 Massachusetts, do certify that on the 17th day</p> <p>7 of October, 2006, at 11:00 o'clock, the person</p> <p>8 above-named was duly sworn to testify to the</p> <p>9 truth of their knowledge, and examined, and such</p> <p>10 examination reduced to typewriting under my</p> <p>11 direction, and is a true record of the testimony</p> <p>12 given by the witness. I further certify that I</p> <p>13 am neither attorney, related or employed by any</p> <p>14 of the parties to this action, and that I am not</p> <p>15 a relative or employee of any attorney employed</p> <p>16 by the parties hereto, or financially interested</p> <p>17 in the action.</p> <p>18 In witness whereof, I have hereunto</p> <p>19 set my hand this 23rd day of October, 2006.</p> <p>20</p> <p>21 _____</p> <p>22 REGISTERED PROFESSIONAL REPORTER</p> <p>23</p> <p>24</p> <p style="text-align: right;">47</p>	

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Jonathan H. Dowse

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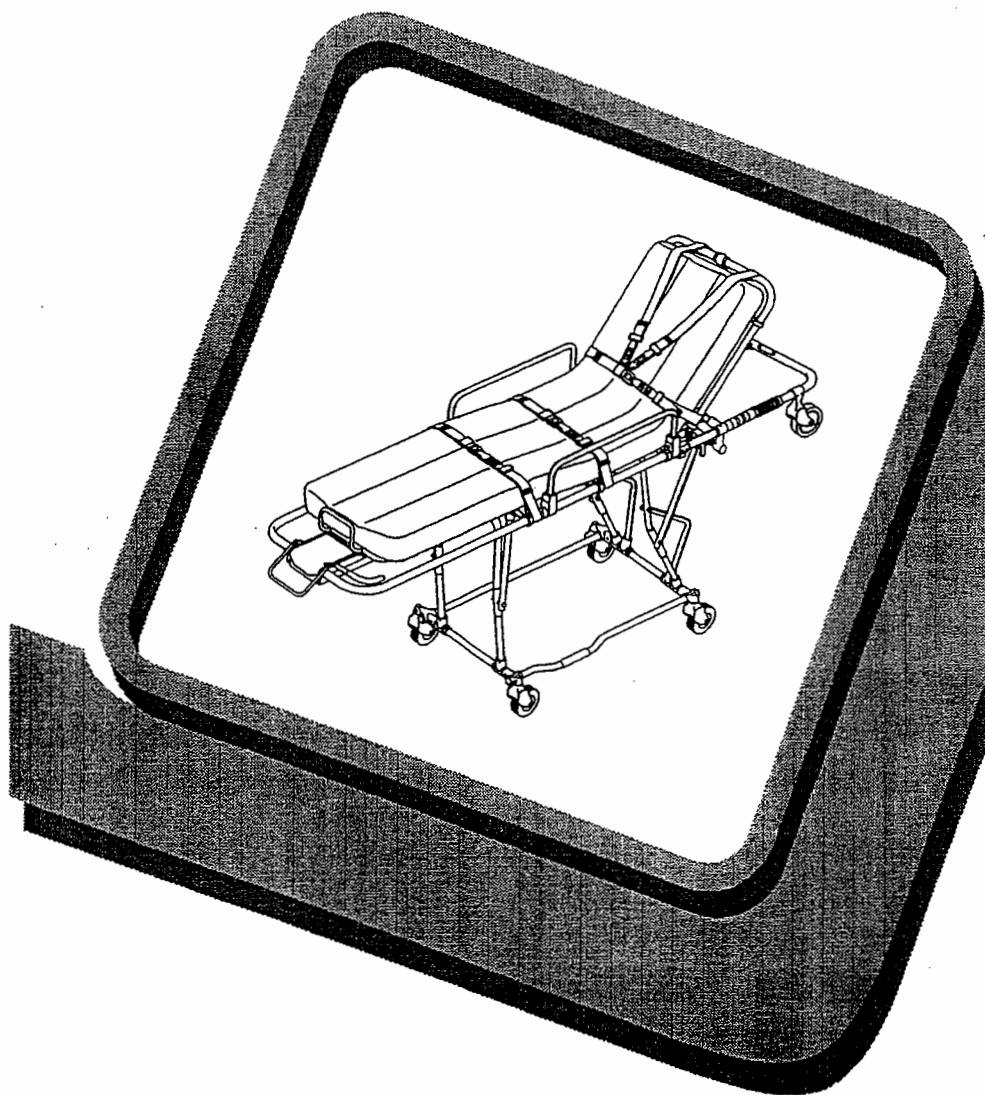
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**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 6**  
**Squadmate Ambulance Cot Users' Manual**



# Model 93ES Squadmate™ Ambulance Cot



**FERNVO**

***Users'  
Manual***

***Congratulations on buying the best!***

*and thank you for being a Ferno customer.*

***Ferno is known worldwide for backing its products with people committed to customer satisfaction.***

***If you need any help installing, operating, or caring for this product, please let us know.***

*The following material is supplied with the cot:*

- 1** Users' manual (234-1968-00) - Use this manual to learn how to operate and maintain the cot.
- 2** EMT: Injury Free manual (234-1250-00) - Use this manual to learn how to keep injury free while you work.
- 3** Video (283-0207-00) - Use this video as a supplement to this manual to learn how to operate the cot.

#### **Disclaimer**

This manual is not all inclusive. Safe and proper use of this product is solely at the discretion of the user. Safety warnings are included as a service to the user. All other safety measures taken by the user should be within and under consideration of the federal, state, and local regulations and standards concerning usage. It is recommended that training on the proper use of this product be provided before using this product in an actual situation.

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February 1996  
Form 234-1968-00

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## Safety Information

### Safety Alerts

Safety alerts identify hazards to avoid. The following safety alerts appear in this manual:

#### WARNING

Improper use can cause injury. Unlock the auxiliary lock only to fold or load the cot.

Dropping an unlocked backrest can cause injury. Support the backrest until it locks into position.

Rolling the cot in the loading position can cause it to tip. Use a rolling position to roll the cot.

Improper use can cause injury and damage. Use the cot only as described in this manual.

An unrestrained patient can fall off the cot and be further injured. Use the restraints to secure the patient to the cot.

Helpers can cause injury. Maintain control of the cot, work the control handles, and direct any helpers.

Helpers can be injured. Show helpers where to grasp the cot to avoid pinch points.

Improper maintenance can cause injury and damage. Maintain the cot as described in this manual.

Improper parts or service can cause injury and damage. Use only Ferno-approved parts and service.

Attaching improper items on the cot can cause injury and damage. Use only Ferno-approved items on the cot.

#### WARNING

Modifying the cot can cause injury and damage. Use the cot only as designed by Ferno.

#### CAUTION

High-pressure water or steam can remove lubricants and cause corrosion. Clean the cot as described in this manual.

Bleach, phenolics, and iodine can cause damage. Do not apply products containing these chemicals to the cot.

Improper lubricants can cause damage. Use E-Z-1™ (or 30-weight oil) to lubricate the cot.

### Bloodborne Disease Notice

OSHA requires employers to protect workers from workplace exposure to bloodborne diseases such as HIV-1 and hepatitis. To reduce the risk of exposure when using the cot, follow the maintenance instructions in this manual.

For more information, contact: U.S. Department of Labor, OSHA, Office of Public Affairs, Room N-3647, 200 Constitution Ave., N.W., Washington, DC 20210.

### Ambulance Requirements

Federal Ambulance Specifications KKK-A-1822 (current version) outlines requirements for ambulances including patient transport devices, cot fasteners, and patient restraints.

For more information, contact: General Services Administration, Specifications Section (3FBP-W), Rm 6654, 7th & D Streets SW, Washington, DC 20407.



## Safety Information (continued)

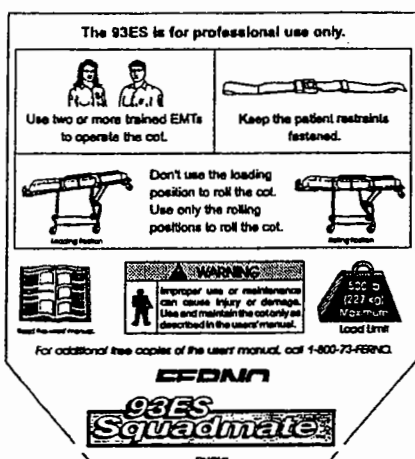
### Safety Symbol



This symbol appears on the safety labels that warn against possible injury.

### Safety Labels

The following safety labels appear on the cot. Follow all label instructions. The diagram shows where the labels are located on the cot. Replace the labels when they become worn (*Parts and Service*, page 24).



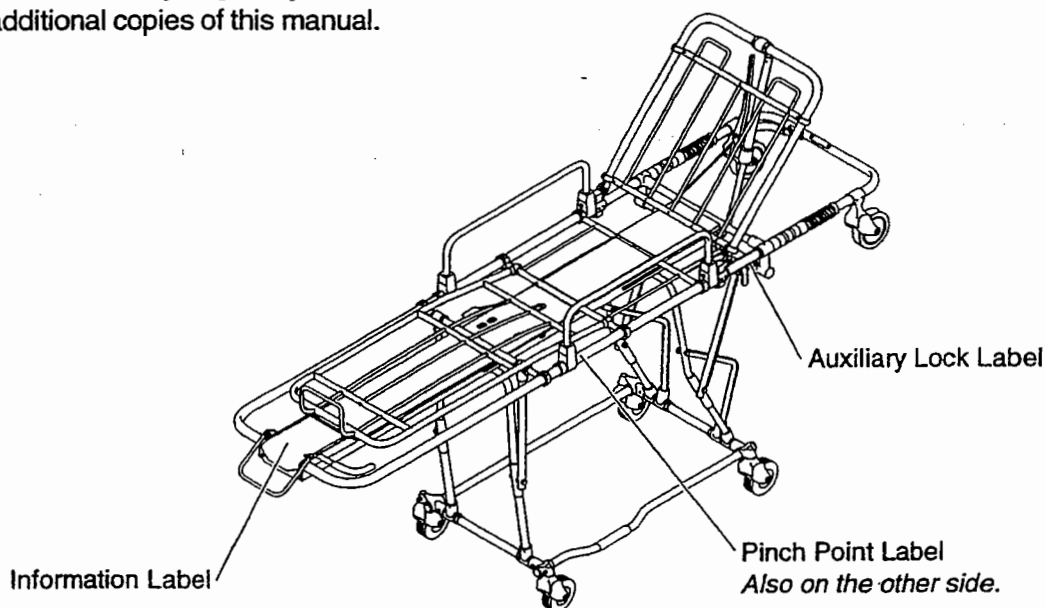
**Information Label:** This label shows the cot's load limit and some of the guidelines in the manual, and reminds you to use and care for the cot as described in this manual. Finally, it gives you the number to call for additional copies of this manual.



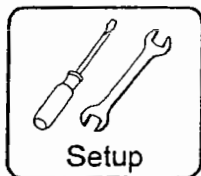
**Auxiliary Lock Label:** This label identifies the auxiliary lock and its locked and unlocked positions. It also informs you when to use the auxiliary lock.



**Pinch Point Label:** This label identifies pinch points on the cot. Keep your hands away from areas where you find this label.



## Before You Begin



Before using the cot, read and follow the instructions in *Cot Setup* (page 24) and in *Inspecting the Cot* (page 22).

Make sure the restraints, mattress, and any accessories ordered for the cot have been properly attached to the cot.

## Learning about the Cot

Read this section to familiarize yourself with the cot, its components, features, and positions.

### Product Description

The Model 93ES Squadmate™ Ambulance Cot (cot) is a patient handling device for professional use by certified emergency medical service (EMS) providers.

The cot has five positions (folded, low-level, mid-level, high-level, and loading).

The cot features an auxiliary lock, an adjustable backrest, swing-down side rails, a fold-down frame, and a lead handle.

Included with the cot are three patient restraints, a mattress, and a training video.

### General Specifications

Specifications are rounded to whole numbers. Contact Ferno Customer Service for detailed specifications (page 25).

#### Length

Shortened Position .....	66 in	168 cm
All Other Positions .....	81 in	206 cm
Width .....	21 in	53 cm
Weight .....	74 lb	34 kg
Load Limit .....	500 lb	227 kg

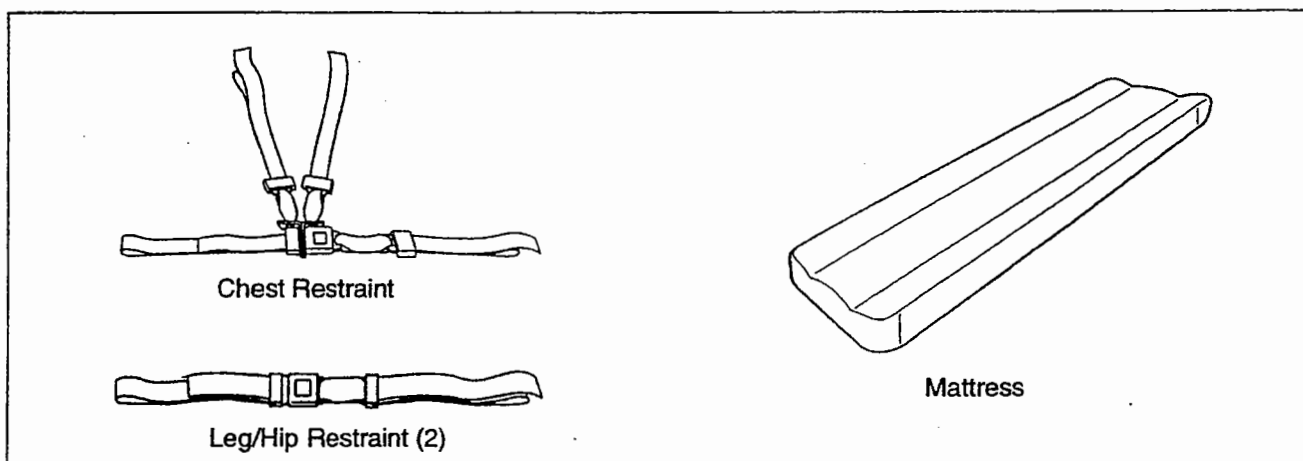
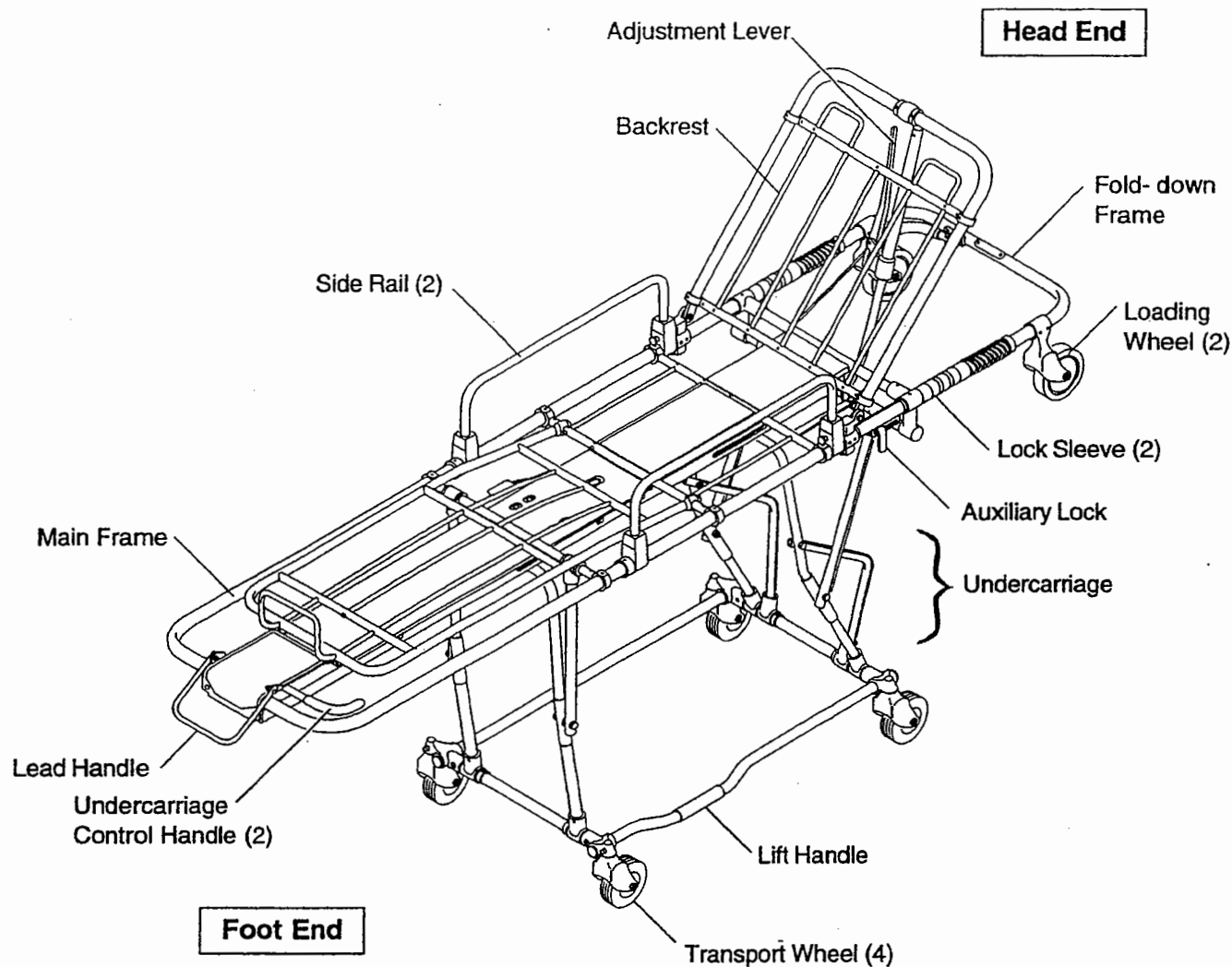
#### Height

Loading .....	38 in	97 cm
High-level .....	33 in	84 cm
Mid-level .....	25 in	64 cm
Low-level .....	18 in	46 cm
Folded .....	9 in	23 cm
Loading Height (maximum) ....	33 in	84 cm

Specifications are subject to change without notice.

# *Learning about the Cot (continued)*

## Components





## Learning about the Cot (continued)

### Patient Restraints

Use all three restraints to secure the patient on the cot.

To fasten a hip or leg restraint, insert the tang into the receiver (Figure A).

To fasten the chest restraint, adjust the center straps down to the bottom straps (Figure B). Slide the tang through the center strap links. Insert the tang into the receiver.

Adjust the restraints by pulling the ends of their straps. The restraints should safely secure the patient without causing discomfort or impairing circulation.

To unfasten a restraint, press the button on the receiver.

Keep the restraints fastened when they are not in use to prevent them from interfering with the operation of the cot.

Read the restraint manual and refer to *Ambulance Considerations* (page 4) for more information.

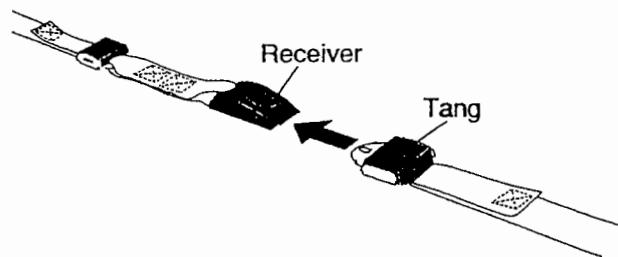


Figure A



Figure B

### ! WARNING

**An unrestrained patient can fall off the cot and be further injured. Use the restraints to secure the patient on the cot.**

### Swing-down Side Rails

Side rails help provide patient security.

To lower a side rail, pull the lock pin, and swing the side rail down (Figure C).

To raise a side rail, swing it up. When fully raised, the side rails automatically lock.

Keep the side rails raised except while transferring the patient to or from the cot.

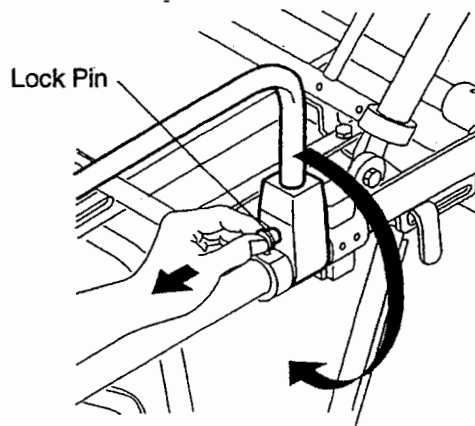


Figure C



## Learning about the Cot (continued)

### Auxiliary Lock

The auxiliary lock keeps the undercarriage from changing to the folded position. The auxiliary lock automatically locks when the cot is changed from the folded to the loading position.

To unlock the auxiliary lock, put the cot in the loading position. Move the lock lever down and to the right to the unlocked position (Figure D).

Fold or load the cot.

#### Important

Practice folding and loading the cot until you clearly understand how to use the auxiliary lock.

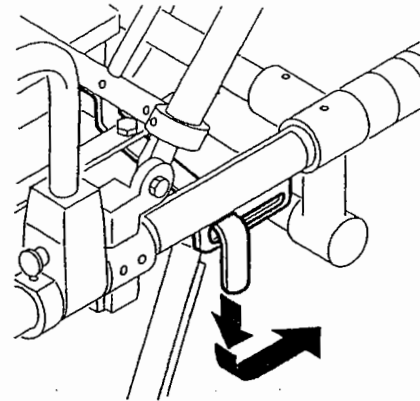


Figure D



#### WARNING

Improper use can cause injury. Unlock the auxiliary lock only to fold or load the cot.

### Undercarriage Control Handles

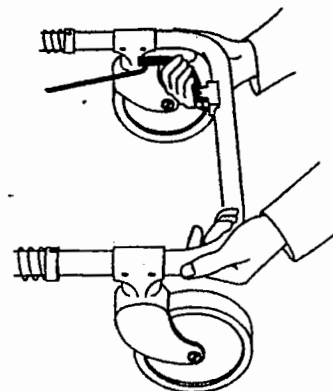
There are two undercarriage control handles; a head-end control handle and a foot-end control handle.

When squeezed, the control handles unlock the undercarriage (Figure E). When the undercarriage is unlocked, the operators can adjust the height of the cot and load the cot. Releasing the control handles locks the undercarriage. Only use the control handles when changing the cot's position or loading the cot.

Read *Changing Cot Positions* (page 13) for instructions on operating the control handles.

#### Important

Both operators should expect (and be prepared to control) the normal downward movement of the cot which occurs when a control handle is squeezed.



Squeezing the head-end control handle using an underhand grasp.

Figure E

**Learning about the Cot (continued)****Adjustable Backrest**

The backrest has a level position and eight raised positions.

Unfasten or loosen the chest restraint before adjusting the backrest.

To adjust the backrest from the level position to the first raised position, lift the backrest (Figure F). The backrest support locks in the first raised position.

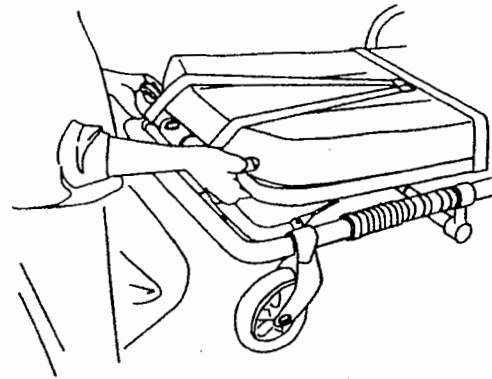
To adjust the backrest from any raised position to any other position, support the backrest frame with one hand, and squeeze the adjustment lever with the other hand (Figure G).

Move the backrest to its new position, and release the adjustment lever. Hold onto the backrest frame until it locks into position.

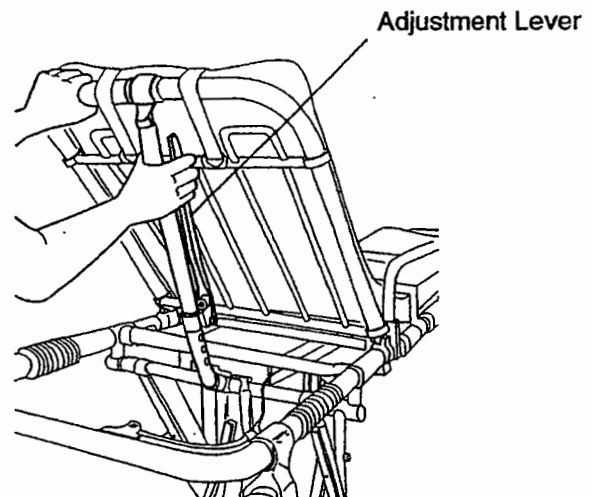
Fasten and adjust the chest restraint.



**WARNING**  
Dropping an unlocked backrest can cause injury. Support the backrest until it locks into position.



**Figure F**



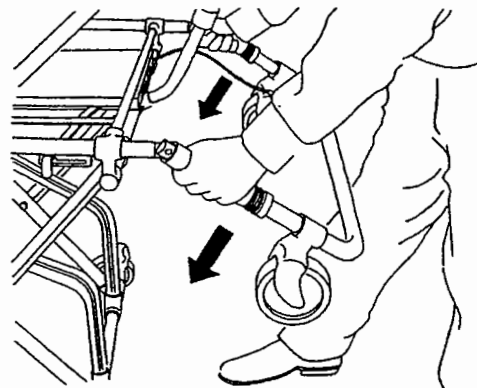
**Figure G**

**Fold-down Frame**

The head end of the main frame folds down to shorten the length of the cot.

To shorten the cot, raise the backrest. Slide the lock sleeves toward the head end of the cot, then press the frame down (Figure H).

To lengthen the cot, pull the frame up until the lock sleeves snap over and lock the hinges.



**Figure H**

## Learning about the Cot (continued)

### Folding Lead Handle

Use the lead handle to aid in rolling the cot.

To unfold the lead handle, grasp the top of it, and pull it to the desired position (Figure I).

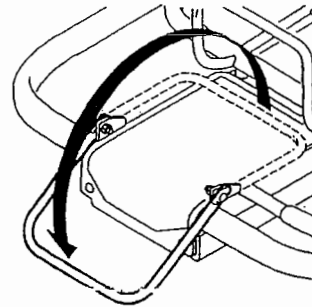
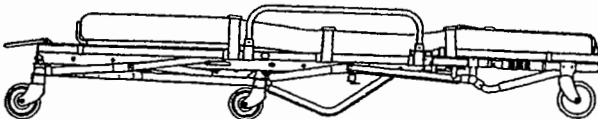


Figure I

### Cot Positions

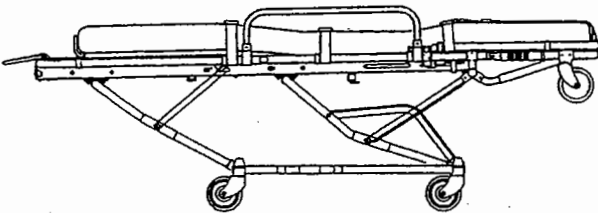
#### Folded Position

For transferring a patient, and transporting in an ambulance



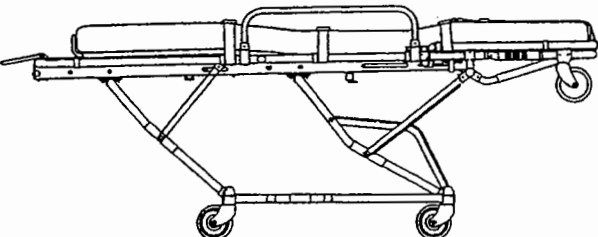
#### Low-level

For rolling the cot and transferring a patient



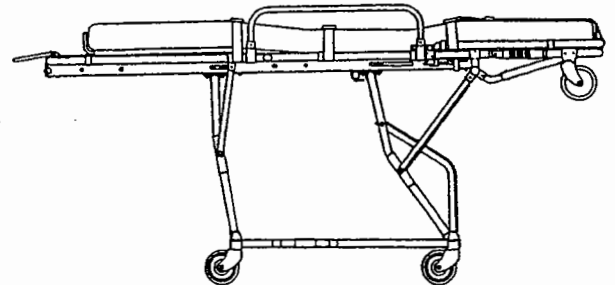
#### Mid-level

For rolling the cot and transferring a patient



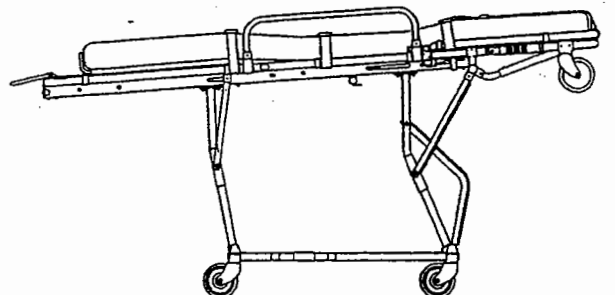
#### High-level

For rolling the cot and transferring a patient



#### Loading Position

For folding or loading the cot



### WARNING

Rolling the cot in the loading position can cause it to tip. Use a rolling position to roll the cot.



## Operator Considerations

### Skills

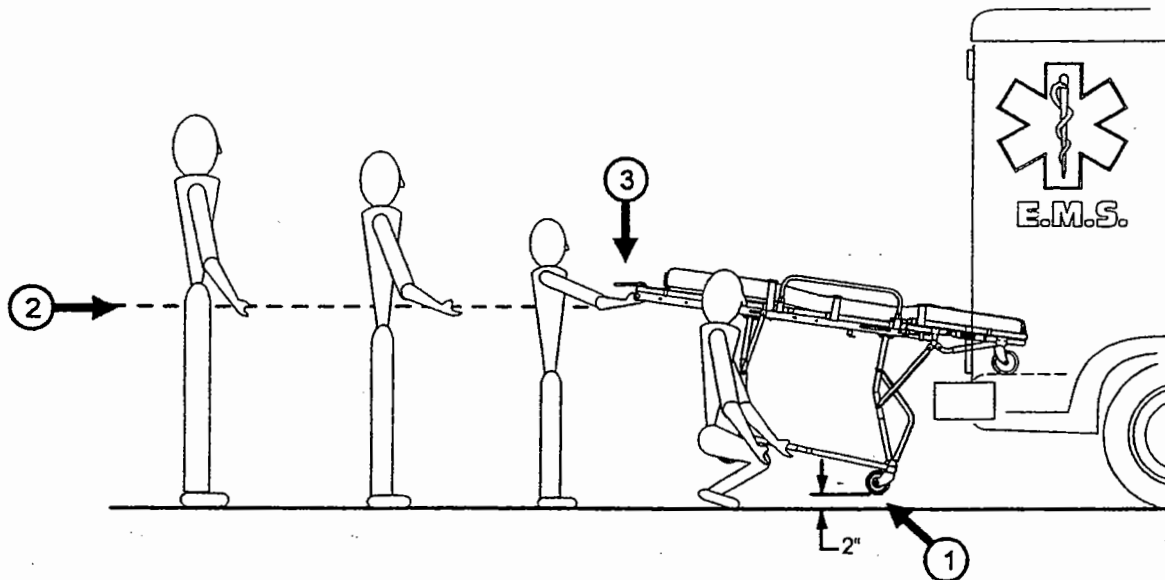
- ☐ Operators should have EMT certification (or equivalent) as a minimum.
- ☐ Operators should have a complete understanding of the procedures described in this manual.
- ☐ Operators should have the ability to assist the patient.

### Training

- ☐ Trainees should follow an EMS-approved training plan.
- ☐ Trainees should read this manual, the EMT: Injury Free manual, and view the training video.
- ☐ Trainees should practice using the cot with weight before using it with a patient.

Test each trainee's understanding of cot operation, and keep training records.  
A convenient form is provided in this manual on page 26.

### Operator Height and Strength



When loading or unloading the cot, consider the following:

- ① The operator at the foot end of the cot must be able to lift the cot high enough to provide a 2 in. clearance between the head-end transport wheels and the ground. The undercarriage needs this clearance as it folds and unfolds.
- ② The lifting height will vary depending on the operator's height. For instance, a 5 ft tall operator will have to raise his or her arms higher than a 6 ft tall operator to provide the 2 in. clearance.
- ③ The higher the control operator has to lift the cot, the more difficult it becomes to hold the cot. The control operator may need help loading or unloading the cot. See *Using Additional Help* (page 20).



## Using the Cot

Read this section to learn how to use and maintain the cot. Read *Learning about the Cot and Operator Considerations* before using this section.

### Guidelines for Use

- The cot is for professional use only.
- Use the cot only as described in this manual.
- Read all labels and instructions on the cot.

### WARNING

**Improper use can cause injury and damage. Use the cot only as described in this manual.**

### Changing Cot Positions

Changing the cot from one position to another requires a minimum of two trained operators. The following instructions speak to both operators.

When changing cot positions:

- Stand at opposite ends of the cot
- Grasp the mainframe with both hands using an underhand grip
- Lift the cot slightly to support the weight before you squeeze a control handle
- Release your grasp after you are sure the cot is locked in the new position

### Important

Both operators should expect (and be prepared to control) the normal downward movement of the cot which occurs when a control handle is squeezed.

When changing positions, listen for the audible "click" which occurs when the cot locks. Always check to make sure the cot is locked before you let go of the main frame. To check, release the control handle, and lift the cot until the transport wheels are just off the ground, then lower the cot onto its transport wheels.

Only lift the weight you can safely handle. Use additional help as needed (*Using Additional Help*, page 21).

### Changing from Folded to Loading

Grasp the main frame, and lift the cot straight up at both ends until the undercarriage unfolds and locks in the loading position (Figure J). The auxiliary lock automatically engages.

Check to make sure the cot is locked in position.

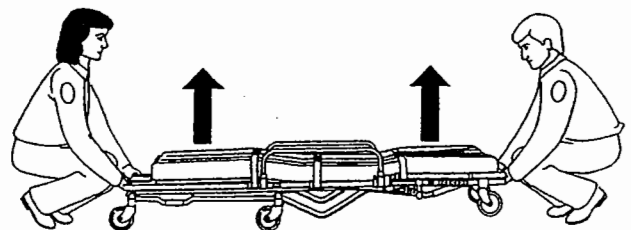


Figure J

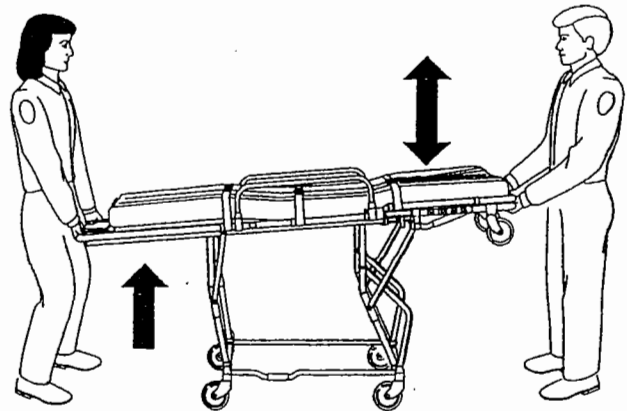
*Using the Cot (continued)***Changing Between Loading and High-level**

Grasp the main frame, and slightly lift the cot at both ends to take the weight off the undercarriage.

Squeeze the head-end control handle and begin to raise or lower the head end of the cot (Figure K).

As soon as the cot begins to move up or down, release the control handle. Continue to raise or lower the head end of the cot until it locks into position.

Check to make sure the cot is locked in position.



**Figure K**

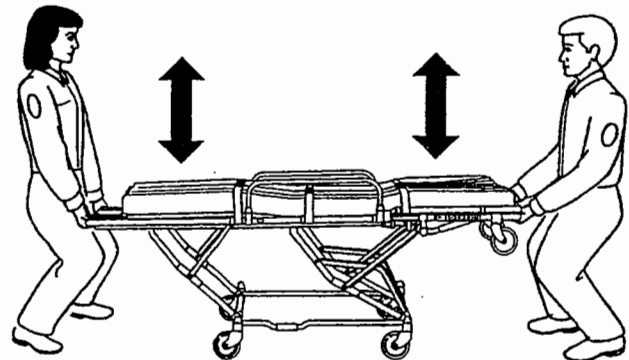
**Changing Between High-level and Mid-level**

Grasp the main frame, and slightly lift the cot at both ends to take the weight off the undercarriage. Squeeze both control handles.

If you are lowering the cot, slightly lower the head end before lowering the foot end (Figure L). If you are raising the cot, raise both ends at the same time.

As soon as the cot begins to move up or down, release the control handle. Continue to raise or lower the head end until the cot locks into position.

Check to make sure the cot is locked in position.



**Figure L**

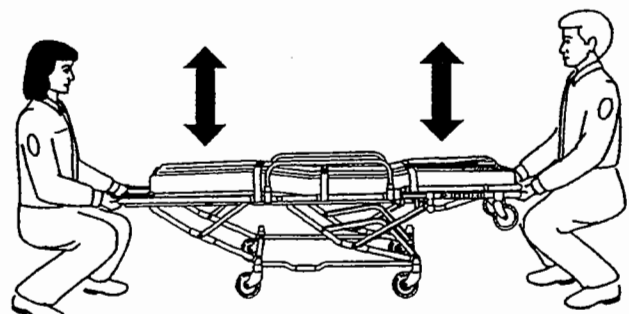
**Changing Between Mid-level and Low-level**

Grasp the main frame, and slightly lift the cot at both ends to take the weight off the undercarriage. Squeeze both control handles.

If you are lowering the cot, slightly lower the head end before lowering the foot end (Figure M). If you are raising the cot, raise both ends at the same time.

As soon as the cot begins to move up or down, release the control handle. Continue to raise or lower the cot locks into position.

Check to make sure the cot is locked in position.



**Figure M**

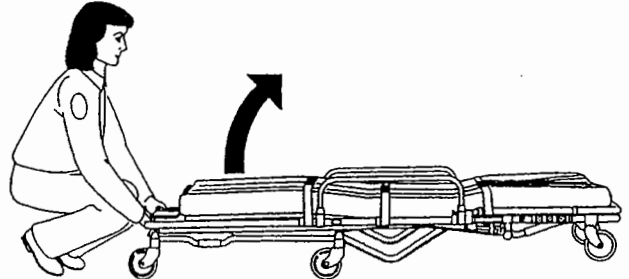
## *Using the Cot (continued)*

### **Folding and Unfolding an Empty Cot**

When the cot is empty, one trained operator can fold the cot or put it into the loading position.

#### **Changing Folded to Loading**

Grasp the main frame at the foot end, and lift until the undercarriage unfolds and securely locks in the loading position (Figure N). The cot will be up on its loading wheels, and the auxiliary lock will be engaged.



**Figure N**

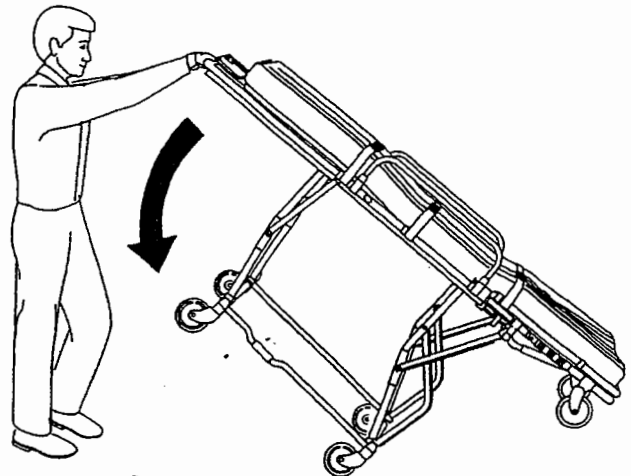
Pull the cot back onto its transport wheels.

#### **Changing Loading to Folded**

Unlock the auxiliary lock.

Grasp the main frame at the foot end, and tip the cot onto its loading wheels (Figure O).

Support the foot end of the cot, squeeze the foot-end control handle and lower the cot to the folded position.



**Figure O**

**Note:** These are the only two position changes that can be done with one operator and an empty cot. All other position changes require two operators.

## Using the Cot (continued)

### Transferring the Patient to the Cot

Raise or lower the cot to the patient's level (Figure P). Use the folded position for transferring a ground-level patient.

Lower the side rails and unfasten the restraints.

Transfer the patient onto the cot using EMS-approved procedures.

Raise the side rails and adjust the backrest or shock assembly as needed.

Fasten the restraints across the patient's legs, hips, and chest and shoulders (Figure Q).

Adjust the restraints to safely secure the patient without causing discomfort or impairing circulation.

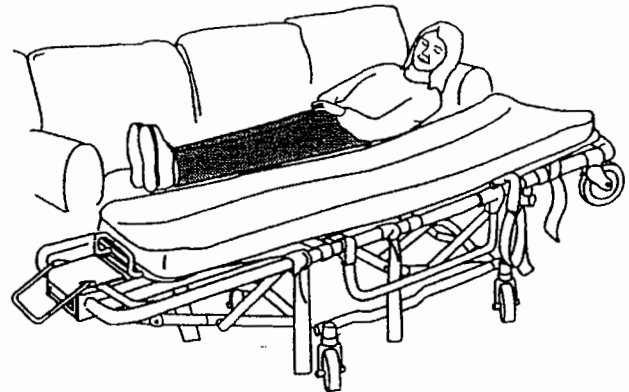


Figure P

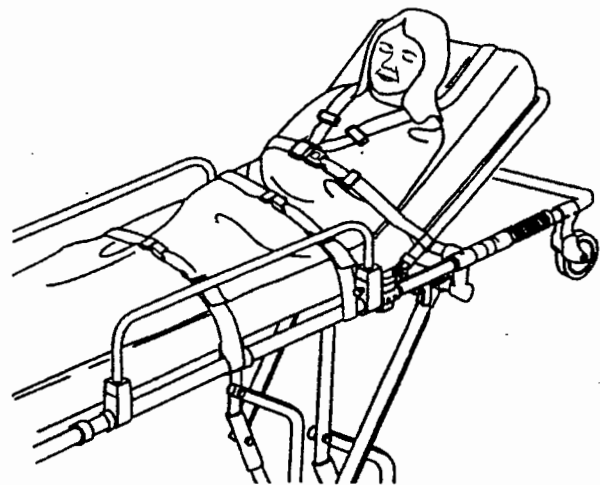


Figure Q

### WARNING

**An unrestrained patient can fall off the cot and be further injured. Use the restraints to secure the patient to the cot.**



**Using the Cot (continued)****Rolling the Cot**

Rolling the cot requires a minimum of two trained operators working together. Use additional help as needed for safety (*Using Additional Help*, page 20).

Place the cot in one of the rolling positions (low-level, mid-level, or high-level).

**Foot-end Operator:**

Grasp the main frame, and push the cot forward (Figure R).

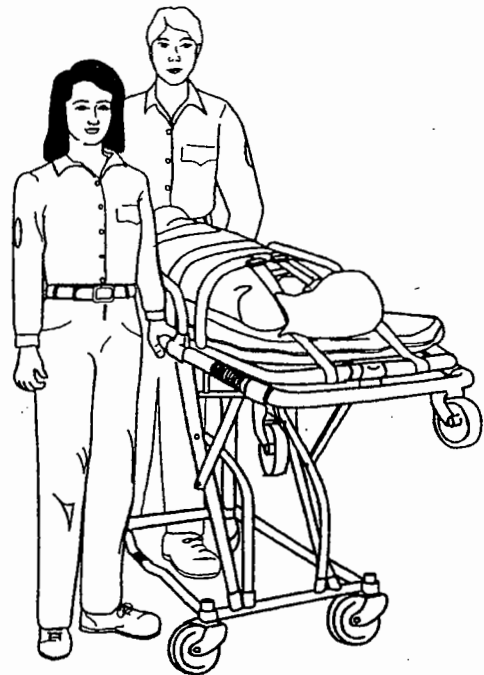
**Assisting Operator:**

Grasp the main frame and steer the cot.

If the cot is in the low-level position, the lead handle can be used to roll the cot.

Roll the cot on smooth, unobstructed surfaces whenever possible. Cross low obstacles (such as door sills) squarely and carefully by lifting and pulling the transport wheels over the obstacle.

Avoid high obstacles (such as curbs) whenever possible. To cross a high obstacle, lift and carry the cot.



**Figure R**

**! WARNING**

**Rolling the cot in the loading position can cause it to tip. Use a rolling position to roll the cot.**

## Using the Cot (continued)

### Loading the Cot into an Ambulance

Loading the cot requires a minimum of two trained operators working together.

To prepare the cot for loading, extend the fold-down frame.

Place the cot into the loading position. Roll the cot into the ambulance until both loading wheels are on the patient compartment floor (Figure S).

#### Control Operator:

Standing at the foot-end of the cot, grasp and support the main frame using an underhand grasp.

#### Assisting Operator:

Unlock the auxiliary lock.

#### Control Operator:

Lift the foot end of the cot until the head-end transport wheels are at least 2 in. off the ground.

Squeeze the foot-end control handle, and push the cot into the patient compartment. The undercarriage folds as the cot loads into the patient compartment (Figure T).

Release the foot-end control handle.

#### Assisting Operator:

Assist the control operator by using the lift handle to lift the undercarriage as the cot loads.

Secure the cot in the cot fastener.

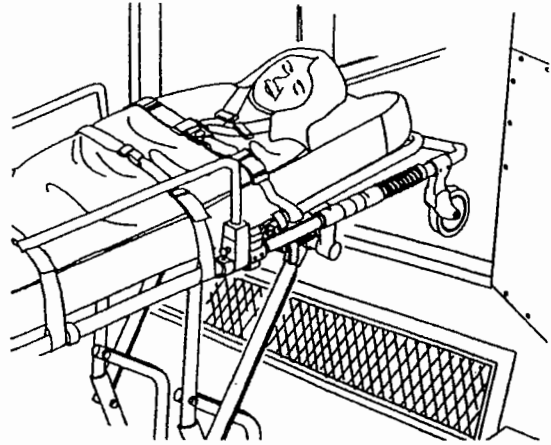


Figure S



Figure T

### Important

To recover from a loading attempt halted by the auxiliary lock, do the following:

1. Release the foot-end control handle.
2. Make sure the auxiliary lock is in the locked position.
3. Return the cot to its transport wheels, and make sure the undercarriage securely locks.
4. Retry the folding or loading procedure.

## Using the Cot (continued)

### Unloading the Cot from an Ambulance

Unloading the cot requires a minimum of two trained operators working together.

To unload the cot, release it from the cot fastener.

#### Control Operator:

Grasp the foot end of the cot using an underhand grasp, and pull the cot from the patient compartment. As the cot is pulled out of the patient compartment, the undercarriage unfolds.

Keep the foot end of the cot high enough for the undercarriage to unfold completely and lock. (See *Operator Height and Strength*, page 13).

#### Assisting Operator:

Assist the control operator by using the lift handle to lower the undercarriage as the cot is pulled out of the patient compartment.

Make sure the auxiliary lock is locked and the cot is locked in the loading position

#### Control Operator:

When the undercarriage is unfolded and locked, lower the cot until the transport wheels are on the ground (Figure U).

Pull the cot away from the ambulance until the loading wheels clear the patient compartment floor.

Change the cot to one of the rolling positions before rolling it away from the ambulance.

### Wiping Down the Cot

Wipe down the cot with disinfectant after each ambulance run. See *Maintenance Schedule* for more information (page 21).

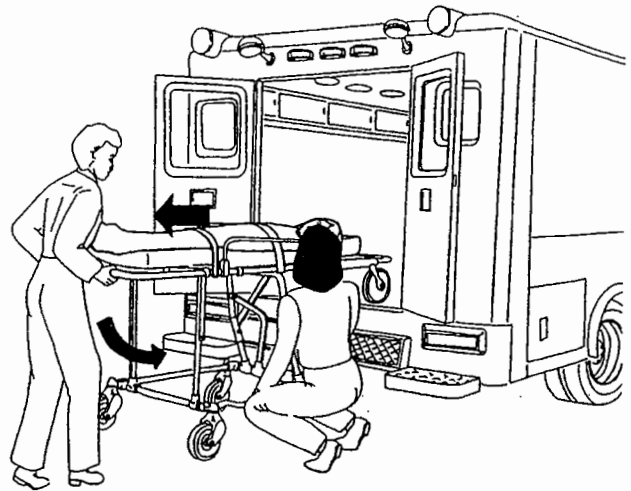


Figure U

See the reference chart on page 29 for a review of the loading and unloading steps. Use the chart as a training guide.

### ! WARNING

Rolling the cot in the loading position can cause it to tip. Use a rolling position to roll the cot.



*Using the Cot (continued)***Using Additional Help**

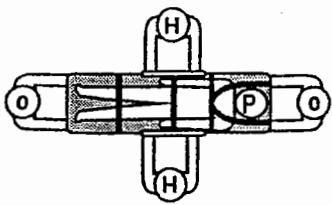
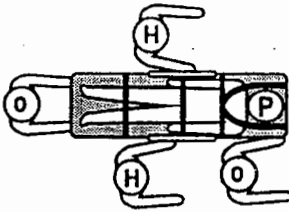
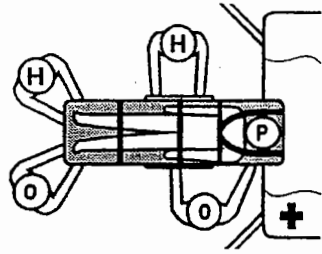
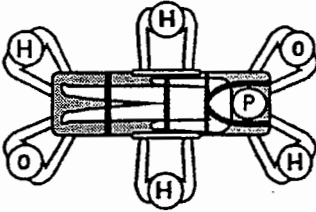
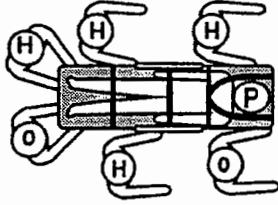
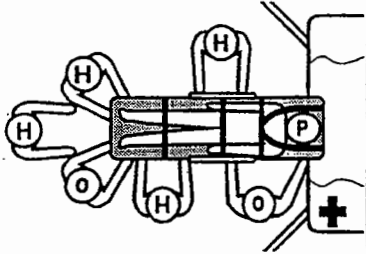
Two trained operators are required to operate the cot. They may need help when working with heavy patients. The operators should maintain control of the cot and direct the helpers. The chart below shows suggested placement for operators and helpers.

Key:

O = Operator

H = Helper

P = Patient

Helpers	Changing Levels	Rolling	Loading/Unloading
Two Operators + Two Helpers			
Two Operators + Four Helpers			

**! WARNING**

**Helpers can cause injury. Maintain control of the cot, work the control handles, and direct any helpers.**

**! WARNING**

**Helpers can be injured. Show helpers where to grasp the cot to avoid pinch points.**

Keep the load limit of the cot in mind when working with a heavy patient.



**Load Limit**

If you suspect the load limit has been exceeded, inspect the cot for damage.



**Using the Cot (continued)****Maintenance Schedule**

The cot requires regular maintenance. Set up and follow a maintenance schedule.

Follow the maintenance schedule below as a minimum.

**WARNING**

**Improper maintenance can cause injury and damage. Maintain the cot as described in this manual.**

Maintenance	Each Use	As Needed	Each Month	
<b>Clean</b> the cot (below).		•		<p>When using a maintenance product, follow the manufacturer's directions and read the manufacturer's material safety data sheet.</p> <p>_____</p> <p>Contact Ferno Customer Service to order Ferno cleaners and disinfectants (page 25).</p> <p>_____</p> <p>Keep maintenance records. Use the convenient form on page 27.</p>
<b>Disinfect</b> the cot (below).	•	•	•	
<b>Inspect</b> the cot (page 22).			•	
<b>Wax</b> the cot (page 22).			•	
<b>Lubricate</b> the cot (page 22).				

**Cleaning the Cot**

Remove the restraints and place them in a mesh laundry bag. Machine wash them on cold/cold using a mild detergent. Allow them to air dry.

Remove the mattress. Clean it by hand with warm water, a mild detergent, and a soft cloth. Rinse it with warm water. Towel it dry.

Clean all surfaces of the cot frame with warm water, a mild detergent, and a soft cloth (or a stiff-bristled brush). Rinse it with warm water. Dry it with a towel.

**Disinfecting the Cot**

Disinfect all surfaces of the cot including the restraints and the mattress (*Bloodborne Disease Notice*, page 4). Follow the disinfectant manufacturer's directions for use.

**CAUTION**

**High-pressure water or steam can remove lubricants and cause corrosion. Clean the cot as described in this manual.**

**CAUTION**

**Bleach, phenolics, and iodine can cause damage. Do not apply products containing these chemicals to the cot.**

## Using the Cot (continued)

### Inspecting the Cot

Have your service technician or an EMSAR® service technician follow the instructions in *Using the Cot* and check the following:

- |   |   |
|---|---|
| <input type="checkbox"/> Are all components present?                        | <input type="checkbox"/> Does the cot load and unload properly?   |
| <input type="checkbox"/> Are the restraints properly installed?             | <input type="checkbox"/> Does the auxiliary lock/unlock properly?   |
| <input type="checkbox"/> Do the side rails adjust properly?                 | <input type="checkbox"/> Do the transport wheels have some tread?   |
| <input type="checkbox"/> Does the shock assembly engage/disengage properly? | <input type="checkbox"/> Are all screws, nuts, and bolts securely in place?                                 |
| <input type="checkbox"/> Does the backrest adjust properly?                 | <input type="checkbox"/> Do all moving parts move freely?   |
| <input type="checkbox"/> Does the fold-down frame fold/unfold properly?     | <input type="checkbox"/> Do the installed accessories work properly without interfering with cot operation? |
| <input type="checkbox"/> Does the cot lock into each position?              | <input type="checkbox"/> Is the ambulance properly prepared for the cot?                                    |

If the inspection indicates a need to service the cot, see *Repair Parts and Service* (page 23).

### Waxing the Cot

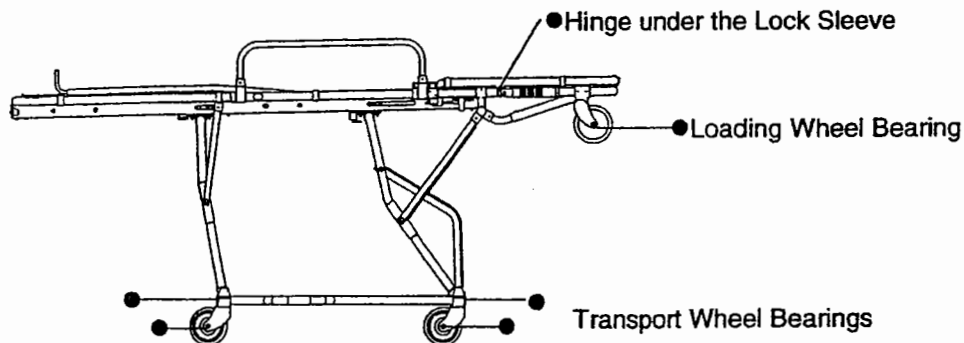
Clean and disinfect the cot before you wax it. Apply a coat of automotive wax to all exposed metal surfaces of the cot. Waxing the cot will make it easier to clean and maintain the appearance of the cot.

### Lubricating the Cot

Lubricate the cot using E-Z-1 lubricant (or 30-weight oil) and the diagram below. Repeat the lubrication points on the other side of the cot.

## CAUTION

**Improper lubricants can cause damage. Use E-Z-1™ (or 30-weight oil) to lubricate the cot.**



## Repair Parts and Service

Use only Ferno-approved parts and service to maintain the safety and performance of the cot.

### Repair Parts

To order parts or to request help, contact Ferno Customer Service (page 25). For professional cot repair see *Service* (page 24).

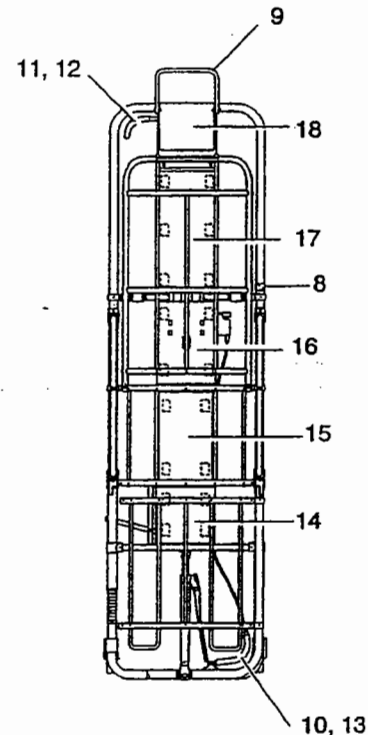
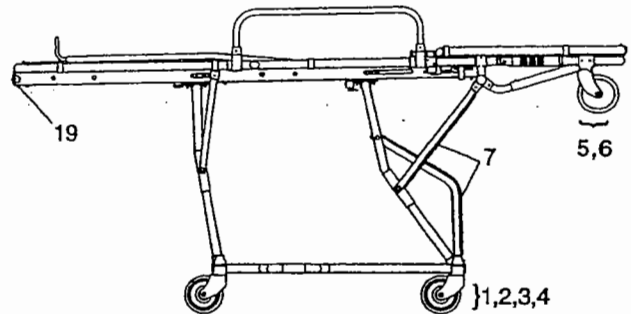
Part #	Description	Qty.
1 ..... 090-5335	...Caster (Complete) .....	1
2 ..... 090-0060	..Wheel (w/bearings/axle bolt/nut) .....	1
3 ..... 090-0180	...Axle bolt & Nut .....	1
4 ..... 090-5336	..Fork .....	1
5 ..... 090-4054	...Wheel .....	1
6 ..... 090-5337	..Axle bolt & Nut .....	1
7 ..... 090-5148	..Scuff Strip (set of 4) .....	1
8 ..... 090-0277	...Fastener Post .....	1
9 ..... 090-5339	...Handle, lead .....	1
10 ... 090-5145	...Handle, head end .....	1
11 ... 090-5338	...Handle, foot end .....	1
12 ... 090-5162	...Grip, foot-end handle .....	1
13 ... 090-5165	...Grip, head-end handle .....	1
14 ... 090-5340	...Head-end Panel .....	1
15 ... 090-5341	...Seat Panel .....	1
16 ... 090-5342	...Leg Panel .....	1
17 ... 090-5343	...Foot Panel .....	1
18 ... 090-5344	...Foot-end Cover Plate .....	1
19 ... 090-5153	...Bumper w/screw .....	2

#### Not shown

090-5345	.....Labels (complete set) .....	1
031-3576	.....451 Mattress, burgundy* .....	1
031-0315	.....Mattress Repair Kit .....	1
031-3062	.....417-1 Restraint (chest)** .....	1
031-2580	.....430 Restraint (hip & leg)** .....	1

\* Also available in orange and white.

\*\* Also available in orange and black.



**WARNING**

**Improper parts or service can cause injury and damage. Use only Ferno-approved parts and service.**



## Parts and Service (continued)

### Service

EMSAR® is the only agent authorized by Ferno to manage, service, and repair Ferno products.

EMSAR factory-trained technicians use Ferno-approved parts and repair procedures.

EMSAR has a franchise location serving you. Phone or fax for details.



1-800-73-EMSAR (Phone)  
513-383-1051 (Fax)

## Cot Setup

This section describes the how to set up the cot before placing it into service.

### Restraints, Mattress, and Accessories

Before placing the new cot in service, have a service technician install the restraints, mattress, and any other accessories shipped with the cot.

Follow all the instructions included in the restraints and accessory package(s).

Keep the instructions included in the restraints and accessory package(s) with this manual for future reference.

### Ambulance Considerations

Use this cot with ambulances that meet the Type II requirements of the Federal Ambulance Specification KKK-A-1822 (current version, page 4).

The patient compartment must have a (Figure V):

- 33 in. (84 cm) maximum floor height
- 14 in. (36 cm) maximum bumper extension
- smooth edge on the floor at the rear door
- level floor large enough for the folded cot
- crash-stable fastener installed (not supplied)

If necessary, modify the ambulance to fit the cot. Do not modify the cot or its operating procedures.

### WARNING

Attaching improper items on the cot can cause injury and damage. Use only Ferno-approved items on the cot.

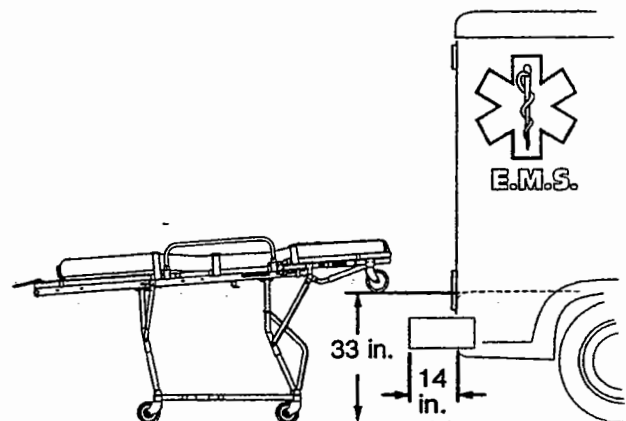


Figure V

### WARNING

Modifying the cot can cause injury and damage. Use the cot only as designed by Ferno.



## Warranty

### Limited Warranty Summary

Ferno-Washington, Inc. (Ferno), warrants the products we manufacture to be free from defects in material and workmanship for one year except as follows:

- (A) External finishes (gelcoat, decals, paint, etc.) are warranted for 90 days.
- (B) Soft goods (webbing, vinyl, fabric, foam, etc.) are warranted for 90 days.
- (C) Repairs and services are warranted for 90 days or until the end of the time period(s) above, whichever comes last.

This limited warranty applies when you use and care for the product properly. If the product is not used and cared for properly, the warranty is void. The warranty period begins the day the product is shipped from Ferno or the day you receive it if you have proof of the delivery date. Shipping charges are not covered by the limited warranty. We are not liable for shipping damages or damages sustained through using the product.

### Limited Warranty Obligation

If a product or part is proven to be defective, Ferno will repair or replace it. At our option, we will refund the product's purchase price. The purchaser accepts these terms in lieu of all damages.

***This is a summary of the limited warranty. The actual terms and conditions of the limited warranty, and the limitations of liability and disclaimers, are available upon request by calling 800-733-3766 or 513-382-1451.***

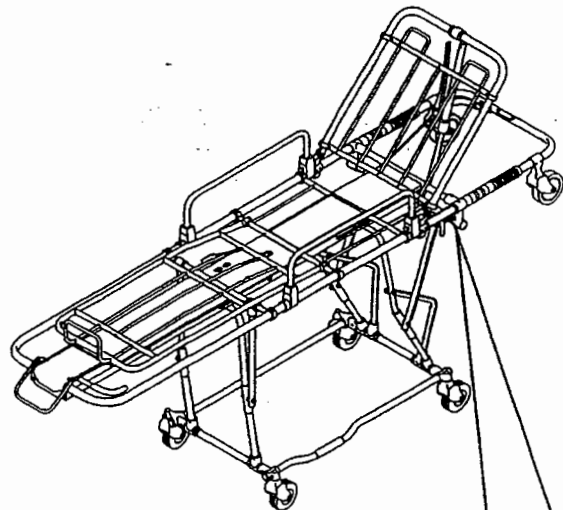
## Customer Service

Customer service and product support are important parts of each Ferno product.

For assistance with the Model 93ES Squadmate™ Ambulance Cot, contact Ferno Customer Service.

Ferno-Washington, Inc.  
70 Weil Way  
Wilmington, Ohio 45177-9371  
Telephone ..... 1-800-73-FERNO  
513-382-1451  
Fax ..... 513-382-1191

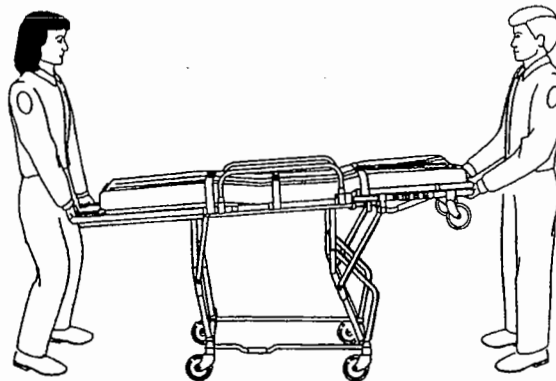
Please have the serial number ready when contacting Ferno Customer Service.



Serial Number \_\_\_\_\_

# 93ES Loading and Unloading Steps

## Quick Reference Chart



### Loading the Cot

*Control Operator*

*Assisting Operator*

1 Place the cot in its loading position.

2 Roll the loading wheels on to the ambulance floor.

3 Grasp the main frame.

Unlock the auxiliary lock.

4 Lift the cot so the head-end transport wheels are at least 2" off the ground.

5 Squeeze the foot-end control handle, and push the cot into the ambulance.

6 Secure the cot in the cot fastener.

Using the lift handle, lift and fold the undercarriage.

### Unloading the Cot

*Control Operator*

*Assisting Operator*

1 Release the cot from the cot fastener.

2 Grasp the main frame, and pull the cot from the ambulance.

Lift the foot end high enough for the undercarriage to unfold completely.

3 Lower the cot on to its transport wheels.

4 Pull the cot away from the ambulance.

5 Change the cot to one of the rolling positions.

Grasp the lift handle and assist the lowering of the undercarriage.

Make sure the auxiliary lock is locked.

COPY AND USE AS A TRAINING GUIDE

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### **Proprietary Notice**

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**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 7**  
**Cot Technician Paul Bonang's Deposition**



Paul A. Bonang, Jr.

08/15/2006

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VOLUME: I

PAGES: 1-78

EXHIBITS: 1-4

UNITED STATES DISTRICT COURT

DISTRICT OF MASSACHUSETTS

- - - - - x

JOSEPH H. KORAN, KIMBERLY KORAN,  
INDIVIDUALLY AND ON BEHALF OF ANA  
KORAN, JOSEPH KORAN, JR., AND  
ERIK KORAN, MINORS,

Plaintiffs,

Civil Action

v.

No. 05-11454-RGS

ELIZABETH WEAVER and TOWN OF SHERBORN,  
Defendants.

- - - - - x

30(b)(6) DEPOSITION of NORTHEAST EMS  
ENTERPRISES, INC. By PAUL A. BONANG, JR.

August 15, 2006

2:35 p.m.

Law Offices of Carmen L. Durso

100 Summer Street

Boston, Massachusetts

Reporter: Michael D. O'Connor, RPR

Paul A. Bonang, Jr.

08/15/2006

<p style="text-align: right;">Page 2</p> <p>1 APPEARANCES:</p> <p>2</p> <p>3 LAW OFFICES OF CARMEN L. DURSO</p> <p>4 By Carmen L. Durso, Esq.</p> <p>5 175 Federal Street</p> <p>6 Boston, Massachusetts 02110</p> <p>7 (617)728-9123</p> <p>8 For the Plaintiffs.</p> <p>9</p> <p>10 PIERCE, DAVIS &amp; PERRITANO, LLP</p> <p>11 By Michael D. Leedberg, Esq.</p> <p>12 Ten Winthrop Square</p> <p>13 Boston, Massachusetts 02110</p> <p>14 (617)350-0950</p> <p>15 For the Town of Sherborn.</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p style="text-align: right;">Page 4</p> <p>1 PROCEEDINGS</p> <p>2</p> <p>3 PAUL A. BONANG, JR.</p> <p>4</p> <p>5 having been satisfactorily identified by the</p> <p>6 production of his driver's license, and duly sworn</p> <p>7 by the Notary Public, was examined and testified as</p> <p>8 follows:</p> <p>9</p> <p>10 MR. DURSO: The same stipulations?</p> <p>11 MR. LEEDBERG: Yes. That's fine.</p> <p>12 DIRECT EXAMINATION</p> <p>13 BY MR. DURSO:</p> <p>14 Q. Have you ever had a deposition before?</p> <p>15 A. No.</p> <p>16 Q. When this deposition is done, this</p> <p>17 gentleman is going to type up a transcript. You</p> <p>18 have the opportunity, if you want, to read that over</p> <p>19 and make any corrections. Would you like to do</p> <p>20 that?</p> <p>21 A. Yeah, I guess. Why not?</p> <p>22 Q. It's up to you. You don't have to do it.</p> <p>23 It's not like homework. It's strictly your choice?</p> <p>24 A. Yes, I might as well take a copy.</p>
<p style="text-align: right;">Page 3</p> <p>1 INDEX</p> <p>2 Deposition of: Direct Cross Redirect Recross</p> <p>3 PAUL A. BONANG, JR.</p> <p>4 By Mr. Durso 4 72</p> <p>5 By Mr. Leedberg 50</p> <p>6</p> <p>7 EXHIBITS</p> <p>8 No. Page</p> <p>9 1 Documents produced by witness 10</p> <p>10 2 Documents produced by witness 27</p> <p>11 3 Model 93ES Squadmate Ambulance Cot User's</p> <p>12 Manual 30</p> <p>13 4 EMSAR Equipment Report 61</p> <p>14</p> <p>15 (Mr. Durso has retained the original exhibits)</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p style="text-align: right;">Page 5</p> <p>1 Q. I will get the original and I will send it</p> <p>2 off to you.</p> <p>3 Could you do that within 30 days after you</p> <p>4 get the transcript?</p> <p>5 A. Yes.</p> <p>6 MR. DURSO: So we will have the usual</p> <p>7 stipulations, and the deponent will have 30 days to</p> <p>8 read and sign, and we'll waive the notarization.</p> <p>9 MR. LEEDBERG: Yes.</p> <p>10 Q. State your name for the record.</p> <p>11 A. Paul Anthony Bonang, Jr.</p> <p>12 Q. What's your address, please?</p> <p>13 A. 214 Asylum Road, Warwick, Rhode Island</p> <p>14 02886.</p> <p>15 Q. What's your date of birth?</p> <p>16 A. 9/24/74.</p> <p>17 Q. Social Security number?</p> <p>18 A. 037-56-8388.</p> <p>19 Q. Is there a telephone number where we can</p> <p>20 reach you?</p> <p>21 A. The house? I always have my cellphone, so</p> <p>22 it's 774-991-0132.</p> <p>23 Q. That's your cell?</p> <p>24 A. Yes.</p>

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<p>1 Q. This is a deposition, and you said you 2 haven't ever done this before, right?</p> <p>3 A. That's correct.</p> <p>4 Q. I sent a 30(b)(6) notice, a particular kind 5 of notice, to Northeast EMS Enterprises, Inc., and 6 you're here in response to that?</p> <p>7 A. That's correct.</p> <p>8 Q. One of the things we asked was for the 9 production of certain documents. Did you bring some 10 documents with you?</p> <p>11 A. Yes, I did. They are not in any order 12 right now.</p> <p>13 Q. Could we take a look at that to see what 14 you brought for documents, to see what we want to 15 copy and not copy?</p> <p>16 A. Sure.</p> <p>17 Q. I'm going to ask you some questions about 18 yourself while we're getting the documents copied. 19 Are you a high school graduate?</p> <p>20 A. Yes.</p> <p>21 Q. What year did you graduate?</p> <p>22 A. It's actually a GED.</p> <p>23 Q. After your GED, did you have some sort of 24 specialized training?</p>	<p>1 Q. Then is Laurie's corporation connected with 2 EMSAR a national corporation?</p> <p>3 A. Is her company do you mean?</p> <p>4 Q. Northeast.</p> <p>5 A. Northeast EMS is, yes. That's all included 6 in one business.</p> <p>7 Q. Is there one company whose name is just 8 EMSAR?</p> <p>9 A. That's correct. They are in Ohio.</p> <p>10 Q. Okay.</p> <p>11 A. That's the corporate office.</p> <p>12 Q. Ferno is in Ohio, too, isn't it?</p> <p>13 A. That's correct.</p> <p>14 Q. Now, are Ferno and EMSAR maintained as 15 separate companies?</p> <p>16 A. Yes. We are the only factory authorized 17 repair for Ferno.</p> <p>18 Q. EMSAR?</p> <p>19 A. Correct.</p> <p>20 Q. Is there any sort of licensing that you 21 have to go through in order to work on this 22 equipment?</p> <p>23 A. You have to be factory certified.</p> <p>24 Q. But does any state or any governmental</p>
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<p>1 A. I went to school in Ohio for cart repair, 2 stretcher repair.</p> <p>3 Q. Tell me about that, please?</p> <p>4 A. It was a one-week course.</p> <p>5 Q. Who gave the course?</p> <p>6 A. It was EMSAR Corporation, which is a sister 7 company to Ferno.</p> <p>8 Q. So EMSAR gave you training?</p> <p>9 A. Yes. It's basically a week certification.</p> <p>10 Most of the training is on site at the New England 11 office with the technicians there.</p> <p>12 Q. Okay. Tell me about Ferno and EMSAR, if 13 you would, please?</p> <p>14 A. The owner of Ferno, his son is actually the 15 president of EMSAR.</p> <p>16 Q. When I looked at the records for EMSAR, I 17 got the name of a woman who called me, Laurie?</p> <p>18 A. She's the franchise owner of EMSAR New 19 England. EMSAR as a whole is a franchise. There's 20 30 franchises throughout the country, and she is the 21 president of the New England franchise.</p> <p>22 Q. So Ferno is the manufacturer of this 23 equipment?</p> <p>24 A. Correct.</p>	<p>1 agency license the people would work on this stuff?</p> <p>2 A. Not to my knowledge, no. I do know that 3 nobody can just buy parts, certain parts for that 4 piece of equipment. We are the only company that 5 can get parts. So they would have to make their own 6 parts. There are other companies out there that 7 perform this type of work, and they call us all the 8 time for parts, and we cannot sell them as part of 9 our franchise agreement.</p> <p>10 Q. Okay. When Ferno sells a piece of 11 equipment, apparently they say in their booklets 12 that EMSAR, or the various franchisees, are the only 13 people who can work on the equipment; is that right?</p> <p>14 A. That's correct.</p> <p>15 Q. How long have you been working for 16 Northeast EMS Enterprises?</p> <p>17 A. A little over four years now.</p> <p>18 Q. Before you did that, were you working in 19 this field or doing something else?</p> <p>20 A. Doing something else.</p> <p>21 MR. DURSO: What I'm going to do is mark 22 all of these as one exhibit shall and we'll deal 23 with individual pages after that.</p> <p>24</p>

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<p style="text-align: right;">Page 10</p> <p>1 (Document marked as Exhibit 1 2 for identification) 3 Q. What I would like to do, first off, if we 4 could, is just have you go through each page, and 5 tell me what that page is. Can we do that? 6 A. Okay. This page here -- 7 Q. The first page? 8 A. Yes. This is the initial call sheet, to 9 the best of my knowledge anyway, and that was taken 10 by my boss at the time, who has since passed away. 11 Q. Who was that? 12 A. Randy Silveira. That's the woman who 13 called you yesterday, that's her husband. The top 14 part -- I'm not actually sure how who filled this 15 out, but I definitely know that where the model of 16 equipment and where it says question of repair, 17 93/29 -- actually, Model 93 is the stretcher in 18 question. 19 Q. I'm going to ask you about model numbers 20 later. We are talking here about the model or the 21 stretcher at the Town of Sherborn that was involved 22 in this particular accident; is that right? 23 A. That's correct. 24 Q. I will ask you to explain later about the</p>	<p style="text-align: right;">Page 12</p> <p>1 A. Actually, this one was issued in January of 2 '06. They renew them every year. 3 Q. Okay. What's the next page? 4 A. Everything we dealt with, with the Town of 5 Sherborn, from the first date to now. February 13, 6 '03 is when the invoice was sent out, but February 7 11th is the actual date. 8 Q. Okay. The first invoice on the memo says, 9 "PMB2." What does that mean? 10 A. That's a preventive maintenance. Bronze 11 would be the B, and that's the lowest form of 12 preventive maintenance that we do. The two is the 13 actual zone they are in according to our shop. 14 Q. Geographic zone? 15 A. Yes. 16 Q. The next invoice is 3/26/03. What does 17 that memo indicate? 18 A. Install accessories. When I was on site, 19 they had asked for a couple of accessories, which 20 I'm not -- I know one of them was an O2 holder for 21 an oxygen bottle holder. The other one, I think, 22 might have been -- I'm not sure, a net or something. 23 I think I do have that paperwork also. Yes, it was 24 just for the oxygen bottle holder and a stow net.</p>
<p style="text-align: right;">Page 11</p> <p>1 model numbers. 2 A. All right. 3 Q. Let's just go through the documents for 4 now. There's no date filled in at the top of this? 5 A. No. Or a serial number. 6 Q. So how do we know when this was filled out? 7 A. There's no way of telling. 8 Q. The only date I see here is "Please call 9 2/12/03." Do you know what that means? 10 A. That's me. I wrote that. That's a 11 follow-up. I was on site, and that's what the 12 customer asked after we had left. While I was on 13 site, he had asked me for that. 14 Q. When were you first involved with this 15 stretcher? 16 A. February 11, '03. This is actually a 17 vehicle inspection sheet, and it takes care of 18 everything that's involved in the ambulance. This 19 paper right here is the actual inspection sheet on 20 the stretcher itself. 21 Q. We'll get there. The second page is your 22 certification? 23 A. That's correct. 24 Q. When was this issued?</p>	<p style="text-align: right;">Page 13</p> <p>1 It goes underneath the head of the stretcher for 2 gloves and equipment and stuff for the operator. 3 Q. Then June 25, 2004, it says "PMB2" again? 4 A. Yes. That's actually a little over a year 5 later. That's another preventive maintenance. 6 Q. What does "preventive maintenance" mean? 7 A. As far as? 8 Q. As far as the work you did. This top one, 9 this is the stretcher we are interested in, right, 10 the 93ES; is that correct? 11 A. Correct. 12 Q. V1 number A-1, that's something different? 13 A. That's their vehicle. 14 Q. That's the ambulance itself. So on the 15 same dates that you were doing the two preventive 16 maintenance inspections, you were also doing vehicle 17 inspections? 18 A. That's correct. 19 Q. Why is that? 20 A. What we do when we do that is we look at 21 all the equipment, the scoop, certain different 22 pieces of equipment. The lock that actually holds 23 the stretcher in the ambulance, we look at that to 24 make sure nothing is worn or broken, and if it needs</p>

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<p style="text-align: right;">Page 14</p> <p>1 to be replaced, replace that, and also the stair  2 chair. There's a chair in the ambulance that they  3 use to carry patients down the stairs. We want to  4 make sure nothing is broken with that.  5 Q. What's a scoop?  6 A. A scoop is what they use if somebody is on  7 the ground, back injury or something, they will take  8 them and it opens up and you can scoop them right up  9 without having to move them, and just put them right  10 on the stretcher.  11 Q. So the 2/13/03, is that the earliest  12 billing that you have for the Town of Sherborn?  13 A. That's correct. We did not do anything, to  14 my knowledge, before that.  15 Q. The next page?  16 A. The next page, this is the actual bronze  17 service level that is the actual PMB2 that you saw  18 on the previous page, and this is what it includes.  19 Q. What's the next page?  20 A. It looks like it might have been a PO  21 number from the Town of Sherborn. This is something  22 the office would know better about than I would.  23 Q. How about the next page, the one that says  24 "Invoice"?</p>	<p style="text-align: right;">Page 16</p> <p>1 the invoice for the stretcher?  2 A. Yes. This is the actual preventive  3 maintenance that was performed on the stretcher, the  4 actual bill that they receive in the mail.  5 Q. The third item code, "NE-SM," and it says  6 in the description small hardware charge. Can you  7 tell me what that is?  8 A. Any time we go through the stretcher and  9 find broken screws, broken roll pins, any hardware  10 that has to be replaced, it just gets put under that  11 general small hardware package.  12 Q. Did you find something that fit into that  13 category?  14 A. That's pretty much a standard we put on  15 every single stretcher. It also includes liquids,  16 oils, cleaning fluids.  17 Q. But is there some way of knowing  18 specifically what it was you did for that particular  19 item?  20 A. Well, the next one, if you look, is  21 auxiliary lock lever and hardware, that's a kit that  22 was replaced on site.  23 Q. Okay. What is the auxiliary lock lever and  24 hardware do?</p>
<p style="text-align: right;">Page 15</p> <p>1 A. This is the actual bill they receive in the  2 mail for the vehicle inspection. The stretcher is  3 not on this one. It's two different ones.  4 Q. This is just for the vehicle itself?  5 A. That's correct.  6 Q. The next page?  7 A. This is my sheet that I fill out on site  8 according to the vehicle inspection that's been  9 performed.  10 Q. This relates only to the vehicle itself?  11 A. That's correct. I don't know if your copy  12 is that great. Mine isn't that great. If you see  13 in the upper left-hand corner, it almost says "stair  14 chair," and it's kind of cut off. If you look in  15 the next column, you can see it better.  16 MR. LEEDBERG: Could we go off the record  17 for a second?  18 MR. DURSO: Sure.  19 (Discussion off the record)  20 Q. So this sheet we're looking at here now,  21 those reference numbers do not relate at all to the  22 stretcher; is that right?  23 A. That's correct.  24 Q. All right. So the next invoice, is this</p>	<p style="text-align: right;">Page 17</p> <p>1 A. The auxiliary lock lever, that prevents the  2 stretcher from collapsing if somebody was to squeeze  3 the handle at the foot end of the stretcher without  4 help from another operator at the head of the  5 stretcher.  6 Q. So there are handles at the end which, if  7 you squeeze them, that will allow the stretcher to  8 go down?  9 A. Correct.  10 Q. But if this auxiliary lock lever is in  11 place, that won't occur when you squeeze them?  12 A. That's correct.  13 Q. That was replaced?  14 A. Correct.  15 Q. Okay. Why was that one replaced?  16 A. Again, you know, this is three and a half  17 years ago. I would assume because it was bent or  18 broke. That had to be the reason why I changed  19 that. I'm trying to remember.  20 Q. Okay. Was the next sheet?  21 A. The next sheet is actually a parts list.  22 It's basically for office use, secretary use, so she  23 doesn't have to look up all the part numbers, and  24 that's for the next sheet in line, the actual</p>

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<p style="text-align: right;">Page 18</p> <p>1 inspection sheet of the stretcher.</p> <p>2 Q. The lower right-hand corner, there are two</p> <p>3 items that are marked in. Could you tell me what</p> <p>4 those two items mean?</p> <p>5 A. Bottom right-hand corner of the parts list</p> <p>6 where it says "Labor Hours"?</p> <p>7 Q. Right here.</p> <p>8 A. That's the small hardware package, which is</p> <p>9 the first one.</p> <p>10 Q. Okay. Again, could you tell me what that</p> <p>11 package is?</p> <p>12 A. Just various nuts, bolts, screws, roll</p> <p>13 pins.</p> <p>14 Q. But things, other than the other items that</p> <p>15 are listed here?</p> <p>16 A. Correct. We don't inventory all nuts and</p> <p>17 bolts and screws. So that gets put as a hardware</p> <p>18 package.</p> <p>19 Q. Okay. Then the thing that says 090-5437,</p> <p>20 that's the auxiliary lock lever and hardware?</p> <p>21 A. That's correct.</p> <p>22 Q. What's the next sheet?</p> <p>23 A. The actual inspection of the stretcher that</p> <p>24 was performed on that date.</p>	<p style="text-align: right;">Page 20</p> <p>1 need that.</p> <p>2 Q. If you could, that would be helpful. Can</p> <p>3 you tell us from memory what you believe the year of</p> <p>4 manufacture was?</p> <p>5 A. Yes, I did look at that. I believe it was</p> <p>6 six years previous to this date. So '97.</p> <p>7 Q. So certain serial numbers were manufactured</p> <p>8 certain years; is that what you do?</p> <p>9 A. That's correct.</p> <p>10 Q. So you have to look at that list --</p> <p>11 A. It would say serial number 400,000 to</p> <p>12 500,000 would be in that same year, January to</p> <p>13 December.</p> <p>14 Q. The A1 is a listing of the actual ambulance</p> <p>15 that it was in; is that right?</p> <p>16 A. Correct.</p> <p>17 Q. The date 2/11, is that the date you</p> <p>18 actually did the inspection?</p> <p>19 A. That's correct.</p> <p>20 Q. You just put your first name and your last</p> <p>21 initial when you signed these forms?</p> <p>22 A. Yes.</p> <p>23 Q. It says "Schedule Maintenance." Had this</p> <p>24 inspection been scheduled sometime prior to the</p>
<p style="text-align: right;">Page 19</p> <p>1 Q. Was this all written by you?</p> <p>2 A. Correct.</p> <p>3 Q. So the model is a 93ES; is that right?</p> <p>4 A. That's right.</p> <p>5 Q. You said something before about the model</p> <p>6 being a Model 23?</p> <p>7 A. No. There's also a Model 29, which is an</p> <p>8 older version of this stretcher, which is no longer</p> <p>9 in production. They discontinued the model 29 and</p> <p>10 now make the Model 93. It's still current to this</p> <p>11 date.</p> <p>12 Q. What does the 93 mean?</p> <p>13 A. It's the actual model number. There's</p> <p>14 nothing, to my knowledge, of why they came up with</p> <p>15 that number.</p> <p>16 Q. It's not the year it was put in service?</p> <p>17 A. No. The actual serial number is how you</p> <p>18 can figure out the date. I wouldn't even know the</p> <p>19 date of the stretcher about I looking at I have. I</p> <p>20 have to look at the serial number chronology.</p> <p>21 Q. What does that serial number tell you?</p> <p>22 A. I believe it was in 19 -- I did look at the</p> <p>23 number. I should have brought that sheet. That's</p> <p>24 something I can have faxed over here, too, if you</p>	<p style="text-align: right;">Page 21</p> <p>1 incident that we're involved with here or did you</p> <p>2 get a call because there was an incident?</p> <p>3 A. We got a call on the seventh, and there's</p> <p>4 paperwork somewhere that says that. That's actually</p> <p>5 in the computer, in Quick Books under "Notes." My</p> <p>6 boss used to put little footnotes.</p> <p>7 Q. Is it possible to get a printout of that</p> <p>8 note?</p> <p>9 A. I believe so. Do you want me to call her</p> <p>10 now and get the serial number chronology sent over</p> <p>11 and that?</p> <p>12 Q. Sure.</p> <p>13 (Discussion off the record)</p> <p>14 Q. Tell me about this form?</p> <p>15 A. Basically, what we do is go through the</p> <p>16 entire stretcher, according to each box, and we</p> <p>17 check that, what pertains in that box, you know,</p> <p>18 with the stretcher. If we find anything as we're</p> <p>19 checking out these sections of the stretcher, we</p> <p>20 would note that we found problems, and label that</p> <p>21 within the appropriate boxes.</p> <p>22 Q. Now, the boxes where you checked pass or</p> <p>23 fail, that's after you've gone through your job,</p> <p>24 right?</p>



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<p>1 A. That's correct.</p> <p>2 Q. After you made any repairs that need to be</p> <p>3 made, right?</p> <p>4 A. That's correct.</p> <p>5 Q. The left-hand side would be the column</p> <p>6 where you would make note of any problems; is that</p> <p>7 correct?</p> <p>8 A. That's actually where the quantity of parts</p> <p>9 go in, the little dashes before each.</p> <p>10 Q. But if you found something that wasn't</p> <p>11 working properly, where would you note it?</p> <p>12 A. Most of the times I would put that in</p> <p>13 "Technician Comments."</p> <p>14 Q. Where is that?</p> <p>15 A. The bottom left.</p> <p>16 Q. There's nothing there, though?</p> <p>17 A. No.</p> <p>18 Q. Does that mean you didn't find any</p> <p>19 problems?</p> <p>20 A. I did find a problem, because I replaced</p> <p>21 the lock lever. So I must have found a problem with</p> <p>22 the lock.</p> <p>23 Q. Okay. Where does that appear in here,</p> <p>24 which section of that?</p>	<p>1 A. That that was replaced, yes.</p> <p>2 Q. Why is "Good" checked off?</p> <p>3 A. I don't know.</p> <p>4 Q. That seems to be, if I'm not mistaken, and</p> <p>5 I could be, but that seems to be the only box you</p> <p>6 filled in where pass or fail isn't checked off?</p> <p>7 A. Yes. I missed that one.</p> <p>8 Q. In the upper right-hand corner where you've</p> <p>9 got "Technician Evaluation," prerepair is checked</p> <p>10 off "Good" and "Post Repair" is checked off "Good."</p> <p>11 Is that a reflection of the fact that you did the</p> <p>12 work?</p> <p>13 A. Say that again.</p> <p>14 Q. You've got "Good" checked off both</p> <p>15 "Prerepair" and "Post Repair." Since you did work</p> <p>16 on it, wouldn't that indicate that there was</p> <p>17 something that had to be done?</p> <p>18 A. Yes. Actually, I made a mistake there.</p> <p>19 Prerepair should be in fair or unacceptable</p> <p>20 condition, and post repair would be in the good.</p> <p>21 Q. The quality assurance evaluation, where</p> <p>22 everything passes, this is after you've done your</p> <p>23 work?</p> <p>24 A. That's correct.</p>
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<p>1 A. That is the actual fourth column on the</p> <p>2 page, halfway down, the safety lock assembly, where</p> <p>3 it's circled.</p> <p>4 Q. Under "Control Assembly," did you write</p> <p>5 something there and then it got scratched out?</p> <p>6 A. Yes. I put the auxiliary lock lever in</p> <p>7 there, and then I realized there's "Actual Safety</p> <p>8 Lock Assembly." So I just moved that into the</p> <p>9 proper column.</p> <p>10 Q. That's why you crossed it out?</p> <p>11 A. Correct.</p> <p>12 Q. Who put the circle around "Safety Lock</p> <p>13 Assemblies"?</p> <p>14 A. That I'm not sure of. I would be</p> <p>15 speculating.</p> <p>16 Q. Under "Safety Lock Assemblies" where it</p> <p>17 says "Prerepair," what's checked off is "Lock</p> <p>18 Levers," and next to that is a one and a circle</p> <p>19 around it. Is that your writing?</p> <p>20 A. Yes.</p> <p>21 Q. What does that indicate?</p> <p>22 A. Quantity one, one lock lever.</p> <p>23 Q. And is that an indication that that needs</p> <p>24 to be taken care of?</p>	<p>1 Q. Let's go to the next pages. The next two</p> <p>2 pages, is this a list of what you do as part of your</p> <p>3 process?</p> <p>4 A. Yes. I did not put this folder together,</p> <p>5 so I didn't really have time to review it. I'm</p> <p>6 reading it as we go along.</p> <p>7 Q. Okay.</p> <p>8 A. Actually, no. This is no good. This is</p> <p>9 for a hospital bed.</p> <p>10 Q. So this doesn't relate, these two pages?</p> <p>11 A. No.</p> <p>12 Q. Okay. The next page after those two looks</p> <p>13 like the purchase order from the town for the</p> <p>14 subsequent year -- no, I'm sorry. This is also --</p> <p>15 A. This must have been for the accessories.</p> <p>16 Yes, 14939 is the invoice number, and that invoice</p> <p>17 was for accessory installation.</p> <p>18 Q. This is the oxygen bottle and the stow</p> <p>19 thing you told us about before?</p> <p>20 A. Correct.</p> <p>21 Q. And then the invoice is the next page, I</p> <p>22 guess, right?</p> <p>23 A. That's correct.</p> <p>24 Q. The next page after that?</p>

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<p style="text-align: right;">Page 26</p> <p>1 A. This is my actual sheet while I was on site  2 installing the accessories.  3 Q. Did we see a similar sheet for the other  4 work that you did? I guess I don't remember seeing  5 it?  6 A. A similar sheet? I'm sorry.  7 Q. A similar sheet when you did the other  8 work?  9 A. When I did the preventive maintenance work?  10 Q. Yes.  11 A. That was that sheet we went through.  12 Q. With the boxes?  13 A. Yes.  14 Q. Instead of one that looked like this?  15 A. Yes. This is just a quick repair sheet.  16 Q. Okay.  17 A. This wasn't a preventive maintenance at  18 this time.  19 Q. Okay.  20 A. That hadn't been done.  21 Q. All right.  22 MR. DURSO: Could you mark these three  23 sheets as Exhibit 2.  24</p>	<p style="text-align: right;">Page 28</p> <p>1 equipment failure?  2 A. Not to my knowledge, no.  3 Q. So what were you looking for?  4 A. Anything at that point. It is preventive  5 maintenance, so we go through the entire stretcher  6 front to back and make sure nothing is broke or  7 nothing is loose, and make sure everything is  8 working properly.  9 Q. So as sit here today, you don't have any  10 memory of someone saying to you, we had a  11 malfunction with this stretcher, and that's why  12 we're having you do this?  13 MR. LEEDBERG: Object on form.  14 A. I try and remember, but I would be guessing  15 as to remembering what he said. Vaguely I remember  16 someone telling me that something was bent, and they  17 tried to straighten it out, and he had showed me the  18 lever. Again, I'm just trying to remember, and I'm  19 not sure if that was the actual place. That's  20 probably 3,000 stretchers ago.  21 Q. So do you remember who it was you talked to  22 or is that noted anywhere in these records?  23 A. I believe it was a guy that pulled up in a  24 landscaping truck. It's a non-staffed fire</p>
<p style="text-align: right;">Page 27</p> <p>1 (Document marked as Exhibit 2  2 for identification)  3 Q. I know we said those don't apply, but would  4 you put them back in where we were so we keep all  5 the documents together.  6 Okay, on Exhibit 2. So this customer note  7 sheet, this is the note that indicates that you've  8 got a call for service on February 7th?  9 A. Correct.  10 Q. Then the next sheet is serial numbers, and  11 we need to look at the serial number which is  12 L443983?  13 A. It actually falls in January of '96 to  14 December of '96.  15 Q. Okay. Now, when you get a call for  16 something like this, do you talk to the people who  17 actually work with the equipment?  18 A. Yes and no. When I get on site, sometimes  19 they are there.  20 Q. Okay. Do you remember whether you did in  21 this case?  22 A. No. I do not recall.  23 Q. Did somebody tell you that an individual  24 being carried said he was injured as a result of</p>	<p style="text-align: right;">Page 29</p> <p>1 department.  2 Q. Call fire department?  3 A. Yes. Again, I'm guessing, but I'm pretty  4 sure it was a landscaping truck, and he's the one  5 who actually let me in.  6 Q. Looking at this form, does that help you  7 remember what you saw that caused you to replace  8 that equipment?  9 A. Well, I know that I wouldn't have just  10 replaced that safety lock lever if nothing is wrong  11 with it. I know that. So there obviously was  12 something wrong with it for me to replace that. I  13 had replaced some previous to that on other  14 stretchers, and even after that.  15 Q. Why had you replaced the others?  16 A. For bending them, breaking them.  17 Q. Is this a piece of the equipment that gets  18 a lot of usage?  19 A. Yes. Every time it goes in and out of the  20 truck. They need to unlock it in order to get it in  21 the vehicle. It's basically the only purpose that  22 that serves.  23 Q. Are you familiar with this?  24 A. Yes.</p>

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<p style="text-align: right;">Page 30</p> <p>1 Q. Is there somewhere in here, in the 2 diagrams, where you can show me where you're talking 3 about? 4 A. Right there. 5 Q. Where it says "Auxiliary Lock"? 6 A. Yes. There might be a better picture of 7 it, but that's only an owner's manual and not a 8 service manual. 9 Q. So there's a service manual somewhere that 10 shows this stuff better? 11 A. That's correct. I can also have that faxed 12 over, too. 13 Q. If you could, it might be helpful so we 14 know we are talking about the same thing. Could you 15 do that? 16 A. Yes. 17 MR. LEEDBERG: For the record, we're 18 referring to what? 19 MR. DURSO: Page 7 of the Model 93ES 20 Squadmate Ambulance Cot user's manual. 21 (Discussion off the record) 22 (Document marked as Exhibit 3 23 for identification) 24 Q. This Exhibit 3, it's the user's manual, and</p>	<p style="text-align: right;">Page 32</p> <p>1 ambulance. 2 Q. Then coming out, what happens? 3 A. When they come out, the legs automatically 4 fold down and lock. 5 Q. What makes them do that? 6 A. They are free floating. So as they are in 7 the ambulance, they are up against the actual 8 mainframe, they are folded up underneath the 9 mainframe, and as they wheel it out, gravity will 10 take the legs back down. 11 Q. No spring, just gravity, right? 12 A. No spring. 13 Q. And -- 14 A. It is under some spring tension, but that's 15 not what actually drops the legs right back down. 16 Q. So it comes back up with the foot end that 17 comes out first, right? 18 A. Correct. 19 Q. Now, if the auxiliary lock is not engaged, 20 when the stretcher comes out, the legs fall down 21 into position, and they will lock in position; is 22 that right? 23 MR. LEEDBERG: Objection to the form. 24 A. I would say so. Yeah, they would.</p>
<p style="text-align: right;">Page 31</p> <p>1 we're going to be looking at Page 7, at least 2 initially. 3 A. I don't know if I got myself in trouble, 4 but that tech manual is strictly confidential. 5 Q. We'll agree it won't be given to anybody 6 else. 7 MR. LEEDBERG: Yes, we'll agree to that, 8 too. 9 Q. What I want to ask you is this. There's a 10 foot end and a head end shown in that diagram? 11 A. Correct. 12 Q. Am I correct in understanding that when you 13 put the patient into the vehicle, the loading wheels 14 at the head end go in first? 15 A. That's correct. 16 Q. And the loading wheels are supposed to be 17 at the level of the floor in the back of the vehicle 18 where you load the patients, right? 19 A. That's correct. 20 Q. When the stretcher is brought up there, is 21 the angle device at the bottom of the undercarriage 22 what pushes against the vehicle and folds the 23 undercarriage up? 24 A. Correct. That hits the bumper of the</p>	<p style="text-align: right;">Page 33</p> <p>1 Q. Okay. 2 A. More if somebody was squeezing that actual 3 undercarriage control handle. Somebody actually has 4 to be squeezing that undercarriage control. 5 Q. When it comes up? 6 A. Yes. For it to drop. 7 Q. And when it comes down, does it lock into 8 position? 9 A. Yes, it does automatically. 10 Q. And if you squeeze the undercarriage 11 control handle after it locks into position, what 12 happens? 13 A. If the auxiliary lock is locked or 14 unlocked? 15 Q. I'd like to know both ways. 16 A. If the auxiliary lock is locked, you 17 squeeze the handle and nothing will happen. If it's 18 unlocked, the stretcher will collapse. 19 Q. If the auxiliary lock is malfunctioning in 20 some way, what happens? 21 A. If the auxiliary lock is bent in any form, 22 and it is in the unlocked form and somebody squeezes 23 that handle, and they are pushing against something, 24 if they are wheeling it in the direction of the head</p>

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<p style="text-align: right;">Page 34</p> <p>1 end, then, yes, the legs will fold under.</p> <p>2 Q. In terms of the amount of time it will take</p> <p>3 the legs to fold under, is it instantaneous or slow?</p> <p>4 A. It's instantaneous.</p> <p>5 Q. Is there any device that would allow the</p> <p>6 stretcher to come down to the ground slowly?</p> <p>7 MR. LEEDBERG: Objection as to form.</p> <p>8 A. There would have to be two operators. You</p> <p>9 really can't see a good picture of it here. But at</p> <p>10 the head end, if I was standing facing the stretcher</p> <p>11 at the head end, on the right-hand corner, there's a</p> <p>12 handle there for the other operator. Squeeze that</p> <p>13 handle, along with the operator at the foot end,</p> <p>14 simultaneously squeezing that handle and lowering</p> <p>15 the stretcher down will get that into multi-level</p> <p>16 bed positions.</p> <p>17 Q. That requires two operators to be</p> <p>18 intentionally bringing it down slowly?</p> <p>19 A. Correct.</p> <p>20 Q. And if they are not doing that, it will</p> <p>21 fall down without anything slowing its fall; is that</p> <p>22 a fair statement?</p> <p>23 MR. LEEDBERG: Objection as to form. You</p> <p>24 can answer.</p>	<p style="text-align: right;">Page 36</p> <p>1 is mainly used for taking it from a load position,</p> <p>2 which means loading it into the ambulance, taking it</p> <p>3 out of that load position and dropping it down into</p> <p>4 a bed position.</p> <p>5 Q. Okay.</p> <p>6 A. The actual head end has to lower first,</p> <p>7 because the stretcher is actually, when it's in the</p> <p>8 load position, it's on an angle, the head end being</p> <p>9 the highest for the load wheels to clear the back.</p> <p>10 They cannot lower that down into bed positions until</p> <p>11 the head end is equal with the foot end.</p> <p>12 Q. On Page 11, is that the loading position</p> <p>13 you're talking about?</p> <p>14 A. Yes. You can see how the head is clearly</p> <p>15 higher.</p> <p>16 Q. When you're coming out of the ambulance,</p> <p>17 does the cart go immediately to the loading</p> <p>18 position?</p> <p>19 A. Yes, it does.</p> <p>20 Q. Then the head end has to be pressed to</p> <p>21 bring it to the high level position?</p> <p>22 A. That's correct.</p> <p>23 Q. When it's at the high level position, can</p> <p>24 it be lowered any further by pressing the head end</p>
<p style="text-align: right;">Page 35</p> <p>1 A. If they are both squeezing that handle and</p> <p>2 they don't lift, yes, the stretcher will collapse.</p> <p>3 Q. Okay. So there's no piston, spring or</p> <p>4 device that makes it fall down slowly?</p> <p>5 A. No.</p> <p>6 Q. It's designed to go up and go down quickly,</p> <p>7 I assume; is that right?</p> <p>8 MR. LEEDBERG: Objection as to form.</p> <p>9 A. Yes.</p> <p>10 Q. Okay. I think I understand. On Page 9,</p> <p>11 the top of that page, that's the auxiliary lock we</p> <p>12 were talking about?</p> <p>13 A. That's correct.</p> <p>14 Q. When that device is in the locked position,</p> <p>15 that will keep the legs from folding even if the</p> <p>16 head end control handles are pressed?</p> <p>17 A. No. The foot end.</p> <p>18 Q. I'm sorry, the foot end. If the foot end</p> <p>19 handle is squeezed, the auxiliary lock will prevent</p> <p>20 the legs from collapsing; is that correct?</p> <p>21 A. Correct.</p> <p>22 Q. What about the handle in the head end?</p> <p>23 A. The head end will only drop down six</p> <p>24 inches. The handle at the head end of the stretcher</p>	<p style="text-align: right;">Page 37</p> <p>1 handle?</p> <p>2 A. No. Again, that's classified</p> <p>3 documentation.</p> <p>4 Q. We won't give it to anyone. To lower it</p> <p>5 further, do you have to press the foot end?</p> <p>6 A. That's correct.</p> <p>7 Q. Now, if the auxiliary lock is locked, can</p> <p>8 you go from the loading position to the high level</p> <p>9 position?</p> <p>10 A. Yes.</p> <p>11 Q. If the auxiliary lock is in position, can</p> <p>12 you lower it any further?</p> <p>13 A. Yes. If it is locked in the locked</p> <p>14 position, two operators, if they both squeeze that</p> <p>15 handle, are able to lower that into bed positions.</p> <p>16 Q. You have to squeeze both ends?</p> <p>17 A. Yes.</p> <p>18 Q. If the auxiliary lock is bent and is not</p> <p>19 effective, what happens when you pull the head end</p> <p>20 lever?</p> <p>21 A. I don't recall, to be honest with you.</p> <p>22 Q. What happens if you pull the foot end</p> <p>23 lever?</p> <p>24 A. It will collapse.</p>

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<p style="text-align: right;">Page 38</p> <p>1 Q. To the folded position that's shown there?</p> <p>2 A. It will fold all the way down to the low</p> <p>3 level position.</p> <p>4 Q. The one that says "Folded Position"?</p> <p>5 A. Yes, it will.</p> <p>6 Q. So looking at the 93ES loading and</p> <p>7 unloading steps that's Page 30, I believe.</p> <p>8 MR. LEEDBERG: It seems like we go from 25</p> <p>9 to 30. Is yours the same?</p> <p>10 MR. DURSO: Yes.</p> <p>11 Q. Where it says "Unloading the Cot," do you</p> <p>12 see those steps there?</p> <p>13 A. Yes.</p> <p>14 Q. Do those correctly state the sequence in</p> <p>15 which these ought to be done?</p> <p>16 MR. LEEDBERG: I'm going to object to this</p> <p>17 line of questioning, because I don't necessarily</p> <p>18 accept that he is an expert on using the cot.</p> <p>19 Q. Are you the appropriate person to talk to</p> <p>20 with regard to the unloading procedure?</p> <p>21 A. Yes.</p> <p>22 Q. Are you trained in this technique?</p> <p>23 A. No.</p> <p>24 Q. Are you trained in the function of the</p>	<p style="text-align: right;">Page 40</p> <p>1 A. That's correct.</p> <p>2 Q. But coming out, the wheels dropping</p> <p>3 automatically pulls the auxiliary lock into the</p> <p>4 locked position?</p> <p>5 A. That's correct.</p> <p>6 Q. If it's functioning correctly, then it</p> <p>7 can't drop, because the auxiliary lock is in place?</p> <p>8 A. That's correct.</p> <p>9 Q. But if it's not locked for some reason or</p> <p>10 if it's bent and doesn't lock, that's the way in</p> <p>11 which they could drop down to the lowest level?</p> <p>12 A. If the foot end handle is squeezed, yes.</p> <p>13 Q. Okay. So in order for the stretcher to</p> <p>14 drop, two things have to happen, the auxiliary lock</p> <p>15 must be unlocked or locked in its proper location</p> <p>16 and someone must squeeze the foot end handle?</p> <p>17 A. That's correct.</p> <p>18 MR. DURSO: Off the record.</p> <p>19 (Discussion off the record)</p> <p>20 Q. When there's any kind of a problem with a</p> <p>21 piece of equipment like this, do you have to do any</p> <p>22 paperwork that you send to Ferno?</p> <p>23 A. No. They get a copy of the actual</p> <p>24 equipment report for each stretcher.</p>
<p style="text-align: right;">Page 39</p> <p>1 stretcher while someone is going through this</p> <p>2 particular process?</p> <p>3 A. Correct.</p> <p>4 Q. So do I correctly understand that through</p> <p>5 the process of unloading, the auxiliary lock is</p> <p>6 supposed to remain unlocked until you get the cot</p> <p>7 away from the ambulance?</p> <p>8 A. That's supposed to remain locked until it</p> <p>9 goes back into the ambulance.</p> <p>10 Q. When you're unloading it?</p> <p>11 A. That's in the locked position. When you</p> <p>12 pull the stretcher out of the ambulance and the</p> <p>13 wheels go back down to meet the ground, and that</p> <p>14 latches in, that auxiliary lock lever locks.</p> <p>15 Q. It locks automatically?</p> <p>16 A. Yes. So now the stretcher is able to be</p> <p>17 moved around. When they load the patient up and</p> <p>18 they are going to go back into the ambulance, the</p> <p>19 load wheels go back onto the ambulance, and then the</p> <p>20 auxiliary lock lever is to be unlocked, once the</p> <p>21 load wheels are firmly on the floor of the</p> <p>22 ambulance.</p> <p>23 Q. So putting it in requires you to manually</p> <p>24 unlock the auxiliary lock?</p>	<p style="text-align: right;">Page 41</p> <p>1 Q. Okay. So they get a copy of this?</p> <p>2 A. Oh, Ferno, no. Our corporate office in</p> <p>3 Ohio, I'm sorry, I wasn't following the question.</p> <p>4 Q. Let me see if I understand it. Does the</p> <p>5 EMSAR corporate office in Ohio get this?</p> <p>6 A. Yes. Ferno, I do not believe, to the best</p> <p>7 of my knowledge, they don't get a copy of that.</p> <p>8 Q. Well, let's say, for the sake of argument,</p> <p>9 that there's some problem with that auxiliary</p> <p>10 locking device that's bending. I think you said to</p> <p>11 me that you replaced more than one of them that was</p> <p>12 bent; is that correct?</p> <p>13 A. That's correct.</p> <p>14 Q. Isn't that something that Ferno would need</p> <p>15 to know about?</p> <p>16 A. No, because it doesn't happen all the time.</p> <p>17 To the best of my knowledge, it's due to abuse of</p> <p>18 the stretcher, something getting jammed in there,</p> <p>19 maybe a restraint or something.</p> <p>20 Q. What do you mean; like a strap?</p> <p>21 A. Yes. That's what they call in here, would</p> <p>22 be the actual patient restraint.</p> <p>23 Q. Okay. So if anything like this has to be</p> <p>24 fixed or doesn't seem to work, notice of that is not</p>

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<p style="text-align: right;">Page 42</p> <p>1 sent to Ferno, as far as you know, it is sent to the</p> <p>2 EMSAR corporate office?</p> <p>3 A. Correct. If I in the field deemed</p> <p>4 something as a design flaw, I will bring that to the</p> <p>5 attention of Ferno, and we have done that in the</p> <p>6 past.</p> <p>7 Q. Okay. But this auxiliary lock thing you</p> <p>8 didn't think was a design flaw?</p> <p>9 A. No.</p> <p>10 Q. You think whatever problems come strictly</p> <p>11 from misuse?</p> <p>12 A. Correct.</p> <p>13 Q. Was that the case with the other situations</p> <p>14 that you saw also?</p> <p>15 A. To the best of my knowledge, yes.</p> <p>16 Q. Are you required to send notices of any of</p> <p>17 this information about repairs to Food and Drug</p> <p>18 Administration or any other federal agencies?</p> <p>19 A. Not this, no.</p> <p>20 Q. What do you have to send to Food and Drug</p> <p>21 Administration?</p> <p>22 A. There was a factory recall on another model</p> <p>23 stretcher that the FDA did get involved with, and</p> <p>24 they wanted copies and documentation of every single</p>	<p style="text-align: right;">Page 44</p> <p>1 process?</p> <p>2 A. We were dispatched from the factory to go</p> <p>3 and retrofit all the stretchers in our territory.</p> <p>4 Q. What I mean is, before that happened, did</p> <p>5 you ever get notice about that particular model or</p> <p>6 did it come to your attention that some of those</p> <p>7 models weren't functioning properly?</p> <p>8 A. That's correct, yes, I did.</p> <p>9 Q. And did you make repairs on those models?</p> <p>10 A. Yes, I did.</p> <p>11 Q. What kind of repairs did you make?</p> <p>12 A. We had done that retrofit kit. What it</p> <p>13 was, Ferno quietly was doing it until the FDA had</p> <p>14 stepped in.</p> <p>15 Q. When you say the retrofit kit, are you</p> <p>16 talking about the --</p> <p>17 A. It does not pertain to this piece of</p> <p>18 equipment. It's a totally different model</p> <p>19 stretcher.</p> <p>20 Q. I understand. But did it have an auxiliary</p> <p>21 lock to it?</p> <p>22 A. No.</p> <p>23 Q. It had a different kind of device?</p> <p>24 A. It was a different model stretcher, yes.</p>
<p style="text-align: right;">Page 43</p> <p>1 stretcher in the country that was retrofitted.</p> <p>2 Q. Was that a model before or after this</p> <p>3 particular model?</p> <p>4 A. It was a model after this one.</p> <p>5 Q. Do you remember what it was about that</p> <p>6 model that was problematic?</p> <p>7 A. Dropping patients.</p> <p>8 Q. What was it about the stretcher that caused</p> <p>9 the patients to drop?</p> <p>10 A. I'm not sure. We haven't been able to</p> <p>11 really pinpoint what problem that was.</p> <p>12 Q. But changes were made as a result of that?</p> <p>13 A. Yes. Drastic changes were made.</p> <p>14 Q. When was that that this happened?</p> <p>15 A. That the FDA stepped in?</p> <p>16 Q. Yes.</p> <p>17 A. I want to say about a year ago.</p> <p>18 Q. Okay. Did the FDA conduct an actual</p> <p>19 investigation, do you know?</p> <p>20 A. I do not know.</p> <p>21 Q. Is this something that was dealt with at</p> <p>22 Ferno or at EMSAR or both?</p> <p>23 A. At Ferno.</p> <p>24 Q. Were you at all involved in that particular</p>	<p style="text-align: right;">Page 45</p> <p>1 It was an X-frame cart. This stretcher in question</p> <p>2 is an H-frame cart. Actually, when it's standing up</p> <p>3 in the load position or in the transport position,</p> <p>4 it forms an H. The X cart, the legs actually form</p> <p>5 an X. There's an axle in the center that the legs</p> <p>6 fold on. It's two different styles and models.</p> <p>7 Q. How long before the FDA stepped in was</p> <p>8 Ferno --</p> <p>9 A. I would be speculating. I can only give</p> <p>10 you an approximate time.</p> <p>11 Q. Give me an approximate time?</p> <p>12 A. Maybe three years.</p> <p>13 Q. Do you know whether or not anybody has ever</p> <p>14 sued Ferno or EMSAR for falls of this kind?</p> <p>15 A. Not to my knowledge.</p> <p>16 Q. EMSAR has never been sued by anyone, have</p> <p>17 they?</p> <p>18 A. Not to my knowledge, no.</p> <p>19 Q. Is the only circumstance in which you have</p> <p>20 to file reports with the FDA or any other</p> <p>21 governmental agency is when the agency asks for</p> <p>22 reports?</p> <p>23 A. That's correct.</p> <p>24 Q. So if someone is injured when one of these</p>

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<p style="text-align: right;">Page 46</p> <p>1 stretchers is being used, there's no agency that has  2 to receive a report, as far as you know?  3 A. Not to my knowledge.  4 Q. Have you dealt with any other agencies,  5 other than the FDA, with regard to these stretchers?  6 A. No.  7 Q. When you got the call in February 7th, was  8 this the first time that you had any dealings with  9 the Town of Sherborn?  10 A. According to our records, yes.  11 Q. In terms of maintaining this equipment,  12 what is the recommendation with regard to the  13 maintenance of the equipment?  14 A. The manufacturer recommends somewhere in  15 the neighborhood of 500 to 600 cycles.  16 Q. What does that mean?  17 A. Every time it's loaded -- when it's loaded  18 in the ambulance and unloaded out of the ambulance  19 is one cycle.  20 Q. Do you have any idea what the number of  21 cycles is in Sherborn per year?  22 A. No, I don't.  23 Q. Were you able to make any estimate of the  24 condition of that stretcher when you saw it?</p>	<p style="text-align: right;">Page 48</p> <p>1 Q. If you didn't sell it to Sherborn, could  2 Sherborn have bought it from anyone other than  3 Ferno?  4 A. That's possible.  5 Q. Who could they have bought it from?  6 A. Anybody. Any fire department, any  7 ambulance company.  8 Q. They could have bought it from another  9 user?  10 A. Correct. Ebay is even selling them, which  11 we don't recommend.  12 Q. Is there any kind of incident log that you  13 have at EMSAR with regard to things that happened to  14 stretchers?  15 A. Not to my knowledge, no.  16 Q. So if something happens to a stretcher, is  17 this the primary document that relates to what  18 happened?  19 A. Correct.  20 Q. Is there any other kind of document that  21 will record in a cumulative manner the various  22 things that happened? In other words, is there one  23 document somewhere that will say in the past year or  24 in the past five years these incidents have</p>
<p style="text-align: right;">Page 47</p> <p>1 A. Yes.  2 Q. What was your estimate?  3 A. It was in good condition.  4 Q. This was produced in 1996. Do you know if  5 it had been in service at Sherborn from 1996 until  6 the time you saw it?  7 A. I do not know.  8 Q. Are these devices resold by anybody, other  9 than Ferno?  10 A. Resold?  11 Q. Yes. Ferno made this and sold it  12 originally?  13 A. Oh, yes. I understand your question now.  14 Yes, they are.  15 Q. Who resold them or who are the resellers?  16 A. As used equipment?  17 Q. As rebuilt equipment.  18 A. We do.  19 Q. EMSAR?  20 A. Yes.  21 Q. Do you know whether or not EMSAR sold this  22 equipment to Sherborn?  23 A. That would have to be us, and, no, we did  24 not sell it.</p>	<p style="text-align: right;">Page 49</p> <p>1 occurred?  2 A. That is a standard form.  3 Q. I understand. But what I'm asking is if  4 somehow information from any particular work that's  5 done gets accumulated in one document so that you  6 can see trends, you know, if you started to see that  7 the Model 93ES was having the same problem  8 repetitively, you would look at that particular  9 piece that was causing the problem. Is there  10 anything like that that would accumulate this  11 information so you could follow trends of that kind?  12 A. No.  13 Q. Do you know if there's anything like that  14 that's done at the main EMSAR office?  15 A. Not to my knowledge.  16 Q. Does anybody take any photographs of any of  17 the work that's done on the stretchers?  18 A. Occasionally we do.  19 Q. Did you take any photographs with regard to  20 this particular stretcher?  21 A. No.  22 Q. Who would take the pictures; you yourself?  23 A. Correct.  24 Q. What do you do with the photographs if you</p>

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<p style="text-align: right;">Page 50</p> <p>1 take them?</p> <p>2 A. We usually take them if we feel that</p> <p>3 there's a problem with a design flaw or something,</p> <p>4 and then we would take the picture and send that to</p> <p>5 the manufacturer and EMSAR corporate.</p> <p>6 Q. How often have you done that in the years</p> <p>7 you have been working there?</p> <p>8 A. Probably a handful. Probably five or six</p> <p>9 times.</p> <p>10 Q. Have you ever done it with this model?</p> <p>11 A. Not to my knowledge.</p> <p>12 MR. DURSO: I think I'm done. Do you have</p> <p>13 any questions?</p> <p>14 MR. LEEDBERG: Yes, I have questions.</p> <p>15 CROSS EXAMINATION</p> <p>16 BY MR. LEEDBERG:</p> <p>17 Q. My name is Mike Leedberg, and I represent</p> <p>18 the Town of Sherborn in a lawsuit brought by Mr.</p> <p>19 Durso's client. I just have a few follow-up</p> <p>20 questions.</p> <p>21 Your invoices indicate in June of '04 you</p> <p>22 did particular maintenance on this particular cot?</p> <p>23 A. Yes.</p> <p>24 Q. Do you know if there's a similar checklist</p>	<p style="text-align: right;">Page 52</p> <p>1 A. Yes.</p> <p>2 Q. And it's in the loading position, meaning</p> <p>3 it's tilted a little bit?</p> <p>4 A. Yes.</p> <p>5 Q. So at that point, the auxiliary lock</p> <p>6 automatically locks, correct?</p> <p>7 A. Correct.</p> <p>8 Q. They call it an auxiliary lock, so I'm</p> <p>9 presuming this is a secondary lock. What is it that</p> <p>10 locks the legs in place absent this auxiliary lock.</p> <p>11 Today we have been talking about how this auxiliary</p> <p>12 lock prevents you from being able to lower it if you</p> <p>13 touch the foot end lever, correct?</p> <p>14 A. Yes.</p> <p>15 Q. What other mechanism is holding that up?</p> <p>16 A. Through the center of the stretcher, going</p> <p>17 from head to foot, there are two C channels, and in</p> <p>18 that C channel there's a trolley with four wheels,</p> <p>19 and in the center of that trolley there's two spring</p> <p>20 buttons that lock into holes in the channel that</p> <p>21 prevent the stretcher from falling. The pin is</p> <p>22 actually connected to a cable, and that cable is</p> <p>23 connected to the actual handles on the stretcher.</p> <p>24 Q. Is it connected to the bolt or just the</p>
<p style="text-align: right;">Page 51</p> <p>1 that was generated as a result of that?</p> <p>2 A. Yes, there would be.</p> <p>3 Q. Is that in your files somewhere at EMSAR?</p> <p>4 A. Yes.</p> <p>5 Q. Did you perform that subsequent</p> <p>6 maintenance?</p> <p>7 A. No, I did not.</p> <p>8 Q. You don't know anything about it?</p> <p>9 A. No.</p> <p>10 Q. So I'm absolutely clear, in the process of</p> <p>11 unloading the cart --</p> <p>12 A. Just to get back to your last question, I</p> <p>13 could have been, but I don't remember. I didn't</p> <p>14 look at that date question, so I don't know who</p> <p>15 actually was on that day.</p> <p>16 Q. The documents that you brought relate to --</p> <p>17 A. To this date.</p> <p>18 Q. The month of February?</p> <p>19 A. Yes.</p> <p>20 Q. As you come out of the ambulance, there's a</p> <p>21 person at the foot end pulling the thing out?</p> <p>22 A. Correct.</p> <p>23 Q. And the wheels automatically come down,</p> <p>24 reach the ground and lock?</p>	<p style="text-align: right;">Page 53</p> <p>1 foot end?</p> <p>2 A. Well, there's two trollies, so there's two</p> <p>3 different -- one is connected to -- one side of the</p> <p>4 trolley is connected to the head end and the other</p> <p>5 side is connected to the foot end. There's four</p> <p>6 buttons, four actual buttons that lock into those</p> <p>7 channels, and two of those are controlled by the</p> <p>8 actual head end handle.</p> <p>9 Q. Now, does this make a distinct clicking</p> <p>10 noise as the wheels release downward?</p> <p>11 A. Yes. When it locks into position, yes.</p> <p>12 Q. Or as it passes by the channel without</p> <p>13 necessarily locking into position? There's three</p> <p>14 different adjustments, isn't there?</p> <p>15 A. It doesn't actually hit those at that</p> <p>16 point. It's pretty much stationary.</p> <p>17 Q. It will drop all the way to the ground</p> <p>18 without the users doing anything?</p> <p>19 A. Correct.</p> <p>20 Q. If it's functioning properly, it locks in</p> <p>21 automatically, the auxiliary lock?</p> <p>22 A. That's correct.</p> <p>23 Q. What that does is disable the control</p> <p>24 handles? In other words, you can't raise or lower</p>



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<p>1 it with that auxiliary lock, correct?</p> <p>2 A. That's correct.</p> <p>3 Q. Is that true even if you have both control</p> <p>4 handles at the head and foot end pressed?</p> <p>5 A. No.</p> <p>6 Q. So if you press both, you can raise and</p> <p>7 lower it?</p> <p>8 A. You can raise and lower it. But you're not</p> <p>9 going to the actual folded position that way.</p> <p>10 Q. What positions can you get into that way</p> <p>11 with the auxiliary lock locked?</p> <p>12 A. You can get into the lower -- there's</p> <p>13 different bed positions, which is on Page 11.</p> <p>14 Q. Which position can you get to using the</p> <p>15 control handles with the auxiliary lock locked in a</p> <p>16 locked position?</p> <p>17 A. You can get to the high level, load</p> <p>18 position, low level and mid level.</p> <p>19 Q. But you can't get into the folded position?</p> <p>20 A. With that locked, no.</p> <p>21 Q. I believe you testified earlier that you</p> <p>22 couldn't particularly recall why you replaced the</p> <p>23 auxiliary lock lever on this cot, correct?</p> <p>24 A. That's correct.</p>	<p>1 Q. Did this individual say when it was bent?</p> <p>2 A. No.</p> <p>3 Q. And he didn't say when he straightened it</p> <p>4 out?</p> <p>5 A. No.</p> <p>6 Q. Do you know what this individual looked</p> <p>7 like? You said he was in a landscaping truck.</p> <p>8 A. No. If I saw him again, the face would</p> <p>9 probably come back.</p> <p>10 Q. How certain are you that you were in</p> <p>11 Sherborn when this conversation took place?</p> <p>12 A. I'm not 100 percent positive.</p> <p>13 Q. Can you give me any percentage?</p> <p>14 A. No, I can't.</p> <p>15 Q. How many times would you say you've</p> <p>16 replaced bent levers on a 93ES model?</p> <p>17 A. I couldn't tell you.</p> <p>18 Q. You mentioned something about the</p> <p>19 possibility of the strap getting caught in the</p> <p>20 lever, correct?</p> <p>21 A. Yes.</p> <p>22 Q. Is there a strap that goes near this lever?</p> <p>23 A. Yes.</p> <p>24 Q. What is that strap, what does it do?</p>
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<p>1 Q. So you don't recall if it was bent, right?</p> <p>2 A. No, I do not. The only thing I can say is</p> <p>3 that, like I said, I wouldn't have replaced it if</p> <p>4 there was nothing wrong with it.</p> <p>5 Q. Hypothetically speaking, if they said that</p> <p>6 this thing had folded to the ground for an unknown</p> <p>7 reason, might you replace it out of caution?</p> <p>8 A. Yes.</p> <p>9 Q. So that's a situation where there might not</p> <p>10 necessarily be anything wrong with it?</p> <p>11 A. It's possible. Like I said, this is three</p> <p>12 and a half years ago.</p> <p>13 Q. Sure.</p> <p>14 A. It's speculation.</p> <p>15 Q. Would that explain maybe why you marked it</p> <p>16 good before and after your service?</p> <p>17 A. It's possible. If I remember correctly,</p> <p>18 they said they bent it and tried to straighten it</p> <p>19 out, and when I looked at it, and I'm just</p> <p>20 speculating, but I'm pretty sure this is the place</p> <p>21 where I was at, and the guy that was on site said</p> <p>22 they had bent it and straightened it out, and when I</p> <p>23 looked at it, it seemed to be normal, but I replaced</p> <p>24 it anyway.</p>	<p>1 A. That's the chest restraint.</p> <p>2 Q. Do you know how many times you replaced</p> <p>3 bent levers that you suspected the chest restraint</p> <p>4 played a role?</p> <p>5 A. A handful.</p> <p>6 Q. What is that?</p> <p>7 A. Five or six times.</p> <p>8 Q. What made you suspect that?</p> <p>9 A. Just in the way it was bent. I don't</p> <p>10 automatically assume it was the restraint. It could</p> <p>11 be a number of things.</p> <p>12 Q. Okay.</p> <p>13 A. It could be a number of things that got</p> <p>14 jammed in there.</p> <p>15 Q. What made you suspect the restraint?</p> <p>16 A. That's the most common. That's usually</p> <p>17 what's in the general vicinity.</p> <p>18 Q. Did a customer ever explain that this had</p> <p>19 happened?</p> <p>20 A. Not to my knowledge, no. We have seen the</p> <p>21 restraints come into play in other types of</p> <p>22 equipment, as far as why things would fail.</p> <p>23 Q. Like what? Do you recall anything in</p> <p>24 particular?</p>

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<p style="text-align: right;">Page 58</p> <p>1 A. Certain different model stretcher, there's</p> <p>2 ratcheting teeth, and sometimes the bed linens will</p> <p>3 get caught in there and prevent the actual lock from</p> <p>4 preventing the stretcher from falling and preventing</p> <p>5 it from locking into position.</p> <p>6 Q. What model is that, do you know?</p> <p>7 A. The 35A and 35P, Ferno models.</p> <p>8 Q. How many times has that happened with those</p> <p>9 models?</p> <p>10 A. Numerous times.</p> <p>11 Q. Have there ever been any claims or lawsuits</p> <p>12 relative to that model?</p> <p>13 A. Relative to what?</p> <p>14 Q. To the other model.</p> <p>15 A. No, not to my knowledge.</p> <p>16 Q. Have you ever placed one of these auxiliary</p> <p>17 locks, because they weren't working, in a situation</p> <p>18 where they did not appear bent?</p> <p>19 A. Yes, I would say so.</p> <p>20 Q. Did you ever determine what was causing</p> <p>21 them to fail in those circumstances?</p> <p>22 A. No.</p> <p>23 Q. How many times would you say you replaced</p> <p>24 ones that you didn't suspect the lever being bent as</p>	<p style="text-align: right;">Page 60</p> <p>1 Q. This was a preventive maintenance call,</p> <p>2 correct?</p> <p>3 A. Correct.</p> <p>4 Q. So it wasn't a call to replace a broken</p> <p>5 part, right?</p> <p>6 A. To be honest with you, I can't answer those</p> <p>7 questions, because I didn't take the original call.</p> <p>8 Q. It was billed out as a preventive</p> <p>9 maintenance call, correct?</p> <p>10 A. Correct.</p> <p>11 Q. Earlier we talked about in Exhibit 1 your</p> <p>12 checklist for the cart work, and I would refer you</p> <p>13 back to that. It says "Reason For Call," and the</p> <p>14 "R" is cut off on the copy, and we talked about it</p> <p>15 seems to say "Scheduled Maintenance," correct?</p> <p>16 A. Yes.</p> <p>17 Q. Is it likely that the line that's going</p> <p>18 through the "S" on the scheduled maintenance is the</p> <p>19 tail end of a check mark that was in the on demand</p> <p>20 service?</p> <p>21 A. Yes.</p> <p>22 Q. Meaning that that likely references a check</p> <p>23 mark in the on demand box?</p> <p>24 A. Yes. It means they had actually scheduled</p>
<p style="text-align: right;">Page 59</p> <p>1 the problem?</p> <p>2 A. Like I said, it's a preventive maintenance</p> <p>3 type thing or actually as a -- not a preventive</p> <p>4 maintenance, but as an aggressive means -- I don't</p> <p>5 know how I want to word this. If somebody complains</p> <p>6 the stretcher dropped, we would automatically</p> <p>7 replace that lock, and anything that pertains to</p> <p>8 something that would cause the stretcher to drop.</p> <p>9 Q. So is it fair to say you were mistaken</p> <p>10 earlier when you said there had to have been</p> <p>11 something wrong for this auxiliary lock for you to</p> <p>12 replace it?</p> <p>13 A. Yes, you could say that. I can't say I was</p> <p>14 wrong in that statement, because there was either a</p> <p>15 problem with the part or a problem with the</p> <p>16 stretcher. So therefore, there was a problem, but I</p> <p>17 just don't know where it lies. If I just walked in</p> <p>18 to do a preventive maintenance, I would not change</p> <p>19 that lock, unless somebody told me that they had</p> <p>20 either dropped a patient or it was bent, physically</p> <p>21 damaged.</p> <p>22 Q. In either one of those circumstances, you</p> <p>23 would replace the auxiliary lock, though?</p> <p>24 A. Yes.</p>	<p style="text-align: right;">Page 61</p> <p>1 maintenance is what that check refers to.</p> <p>2 Q. Wouldn't that be a check mark come from the</p> <p>3 on demand service? Do you agree there's something</p> <p>4 cut off there?</p> <p>5 A. I can get the actual copy and see if we can</p> <p>6 make a better copy of that, if that would help you.</p> <p>7 Q. I will show you the copy I have.</p> <p>8 (Document marked as Exhibit 4</p> <p>9 for identification)</p> <p>10 Q. Take a look at that and see if that</p> <p>11 clarifies any of that issue for you?</p> <p>12 A. Yes.</p> <p>13 Q. Does that appear to be an on demand service</p> <p>14 to you or scheduled maintenance?</p> <p>15 A. It looks to me to be more an on demand</p> <p>16 service than a scheduled maintenance.</p> <p>17 Q. Describe the composition of this lever for</p> <p>18 me? First of all, how thick is the lever?</p> <p>19 A. I would say probably a quarter-inch thick.</p> <p>20 Q. What's it made out of, do you know?</p> <p>21 A. Steel.</p> <p>22 Q. How far does it jut out from that control</p> <p>23 box that it goes into?</p> <p>24 A. I'm not sure I follow you, control box?</p>

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<p>1 Q. It seems to go into a box that looks like a 2 shifter mechanism. How far does it stick out? 3 A. Probably three-quarters of an inch or so. 4 Maybe not even that much. 5 Q. The only time in a typical call that the 6 user has to actually manually control that mechanism 7 is to load it back into the ambulance; is that 8 correct? 9 A. That's correct. 10 Q. So you release it, squeeze both handles, 11 and the legs come up? 12 A. I'm sorry? 13 Q. Describe the loading procedure for me? You 14 unlock the auxiliary lock and what else do you do? 15 A. You squeeze the foot end handle and push 16 the stretcher -- well, the other opener can lift the 17 lower frame up and slide the stretcher in, or that 18 particular model, you can push against the back 19 bumper, and the legs will fold up for you. 20 Q. So there's a bar that pushes the legs up as 21 you push it in? 22 A. Yes. That's this angled piece right here. 23 Q. Okay. 24 A. There's a plastic scuff strip on that that</p>	<p>1 Q. Okay. You described retrofitting a 2 different model. What was that model again? 3 A. 35P. 4 Q. That was the recalled one? 5 A. Correct. 6 Q. What part needed to be retrofitted exactly? 7 A. There was a bunch of parts. There was a 8 list of parts that were replaced. The biggest being 9 a lock bar and ratchet bars were the two main 10 things. The lock bar and the actual ratchet bars 11 are what prevents the stretcher from dropping and 12 allows you to lower it in different type bed 13 positions. 14 Q. It's a similar function as to the lever and 15 trolley system on this? 16 A. No. 17 Q. Well, I mean a similar function? 18 A. Yes. 19 Q. It performs the same function to let it go 20 different heights and keeps it from going down on 21 its own, and whatnot? 22 A. Correct. 23 Q. Being familiar with this particular cot, 24 referencing Page 11, if it will help you, what's the</p>
Page 63	Page 65
<p>1 prevents -- this is a metal tube, and on that metal 2 tube there's a plastic scuff strip that prevents 3 that metal tube from getting worn from pushing 4 against the bumper to fold the legs up. 5 Q. Looking at your repair sheet for February 6 13, '03, you described earlier that there's trollies 7 underneath. Is there anything to indicate you did 8 any work on those? 9 A. Not according to this sheet. Not 10 specifically, no. 11 Q. You typically put everything on there that 12 you did, correct? 13 A. It's part of the preventive maintenance 14 schedule for that stretcher. 15 Q. Checking that system? 16 A. Yes. 17 Q. And would you mark it somewhere if you did 18 some work on those trollies? 19 A. Yes, I would. 20 Q. And you don't see anything there? 21 A. No. 22 Q. Does that indicate to you that you didn't 23 do anything on them? 24 A. No repairs done.</p>	<p>1 approximate height difference between the cot in its 2 highest position and its lowest position in? 3 A. I've never measured it, but I would have to 4 say somewhere in the neighborhood of six to eight 5 inches. 6 Q. From the highest position to the lowest 7 position? 8 A. Do you mean the loading position? 9 Q. Whatever position is higher. I presume 10 that either the loading position or the high level 11 position is the highest. I'm trying to get an idea, 12 and I understand you're estimating, of how high this 13 thing can possibly go from top to bottom? 14 A. Roughly three feet. There might actually 15 be an actual -- the actual measurement's 16 specifications in this book here. Well, if you look 17 at Page 24, it gives you the load position to the 18 bottom of the wheels to the ground, which is 33 19 inches. 20 Q. Does that change your earlier estimate? 21 A. No. 22 Q. Does it seem possible to you if the loading 23 wheel is only 33 inches to the ground, that this 24 could possibly fold down three feet, being 36</p>

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<p style="text-align: right;">Page 66</p> <p>1 inches?</p> <p>2 A. In that area, roughly.</p> <p>3 Q. Okay. How far within the folded position</p> <p>4 is that rear wheel off the ground, do you know, if</p> <p>5 at all?</p> <p>6 A. Is what wheel?</p> <p>7 Q. The loading wheel.</p> <p>8 A. It touches the ground.</p> <p>9 Q. When the auxiliary lock is broken and the</p> <p>10 foot end handle is engaged, is it possible to go to</p> <p>11 the folded position?</p> <p>12 A. That's the only way it would go.</p> <p>13 Q. That's the only way it would go down in the</p> <p>14 folded position?</p> <p>15 A. Yes.</p> <p>16 Q. Did you testify earlier it could go down to</p> <p>17 the low level position?</p> <p>18 A. Only because I didn't see this part up</p> <p>19 here. I was referring to the low level as this</p> <p>20 picture.</p> <p>21 Q. I see. So you were referencing low level</p> <p>22 with the upper picture, the picture above it?</p> <p>23 A. Correct.</p> <p>24 Q. So it can go down to the folded position if</p>	<p style="text-align: right;">Page 68</p> <p>1 Q. Do you know if EMSAR had any particular</p> <p>2 contract ongoing with Sherborn at the time to</p> <p>3 regularly maintain their cots?</p> <p>4 A. Previous to this date, no, I don't.</p> <p>5 Q. Since then, have they had any form of</p> <p>6 contractual agreement?</p> <p>7 A. No.</p> <p>8 Q. And you say you're pretty sure this was a</p> <p>9 service call?</p> <p>10 A. Yes.</p> <p>11 Q. I think you said earlier, the 93ES is a</p> <p>12 newer version of the Model 23?</p> <p>13 A. 29.</p> <p>14 Q. What's the difference between those two</p> <p>15 models?</p> <p>16 A. The actual track where those trollies are,</p> <p>17 that 29 does not have that style trolley.</p> <p>18 Q. Okay.</p> <p>19 A. Minor things were changed, like load wheel</p> <p>20 styles were changed. They pretty much -- 99 percent</p> <p>21 or even 100 percent work in the same fashion as far</p> <p>22 as function wise, they operate the same. Somebody</p> <p>23 that operates a 29 would not be lost in any way</p> <p>24 using a 93.</p>
<p style="text-align: right;">Page 67</p> <p>1 that lock is broken and the handle is engaged?</p> <p>2 A. Yes. That's the only way it can go.</p> <p>3 Q. It won't go down on its own, because the</p> <p>4 trollies are locking it in place?</p> <p>5 A. Correct.</p> <p>6 Q. Do you know what the thickness of the</p> <p>7 mattress on this thing is?</p> <p>8 A. I would say three inches.</p> <p>9 Q. Is that something you would have inspected</p> <p>10 while you were doing your preventive maintenance?</p> <p>11 A. Yes. I would look for tears and holes.</p> <p>12 Q. Do you recall, referencing your notes,</p> <p>13 seeing anything wrong with the mattress?</p> <p>14 A. No.</p> <p>15 Q. And if it was just matted down from use,</p> <p>16 wear and tear, would you note that?</p> <p>17 A. No.</p> <p>18 Q. Just tears?</p> <p>19 A. Tears and holes, yes. The state requires</p> <p>20 that it be replaced if there's any holes or tears in</p> <p>21 the mattress.</p> <p>22 Q. Do you know what you did with the lock that</p> <p>23 you took off of this particular cot?</p> <p>24 A. Garbage.</p>	<p style="text-align: right;">Page 69</p> <p>1 Q. Do they have the same auxiliary lock?</p> <p>2 A. At first the 29 not have an auxiliary lock,</p> <p>3 and then towards the end of production of that</p> <p>4 stretcher they came out with an auxiliary lock, yes.</p> <p>5 Q. Do you know what year that was?</p> <p>6 A. No.</p> <p>7 Q. Would it be before the 93ES?</p> <p>8 A. Yes.</p> <p>9 Q. Did you ever do any maintenance on the 29?</p> <p>10 A. Yes, I did.</p> <p>11 Q. Do you recall there being any problems with</p> <p>12 the auxiliary lock in those units?</p> <p>13 A. No.</p> <p>14 Q. Do you recall there being any bending</p> <p>15 problems?</p> <p>16 A. No, not to my knowledge.</p> <p>17 Q. You billed for small hardware on this</p> <p>18 service call from February 13th. Do you know what</p> <p>19 that hardware was for?</p> <p>20 A. It includes a range of things. We use</p> <p>21 different types of -- we use WD-40 for cleaning, we</p> <p>22 use slick 50 oil for lubrication, we use lacquer</p> <p>23 thinners for cleaning clues, tape they may have</p> <p>24 stuck on the stretcher, and it gets all of that off.</p>

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<p style="text-align: right;">Page 70</p> <p>1 It includes all of that stuff. We use steel wool to  2 bring the appearance back. Labels, any labels that  3 need to be replaced.  4 Q. Do you recall if there was any glue or  5 stickers placed on this unit by the user?  6 A. No.  7 Q. You're just speaking generally as to what  8 that might entail?  9 A. Correct.  10 Q. Would any of that be hardware to install  11 the auxiliary lock or would you use the old nuts and  12 bolts for that?  13 A. This auxiliary lock in question, this part  14 number comes with all the parts needed, replacement  15 parts to replace that lock.  16 Q. Including the screws and the fasteners?  17 A. Correct. To take it all off and to put a  18 new one on, that includes all brand new hardware.  19 Q. Earlier you mentioned something about the  20 circumstances where you find a lever that's bent as  21 a result of abuse by the user. What do you mean by  22 "abuse"?  23 A. Misuse.  24 Q. Then you also mentioned that it could be</p>	<p style="text-align: right;">Page 72</p> <p>1 doing that?  2 A. Yes. I'm not sure of the actual model  3 number, but it's called the Ferno Powerflex car.  4 It's an actual hydraulic lift stretcher that we saw  5 some wearing and we took pictures of it and sent it  6 over to corporate also.  7 Q. Did that have anything to do with auxiliary  8 locks?  9 A. No.  10 Q. Do you recall any other circumstances where  11 you recall doing that in the last couple of years?  12 A. No.  13 MR. LEEDBERG: I have no further questions.  14 MR. DURSO: Just a couple more.  15 REDIRECT EXAMINATION  16 BY MR. DURSO:  17 Q. Is there a file at your office that relates  18 to this particular stretcher?  19 A. Yes, there is.  20 Q. Are there other documents in that file that  21 you didn't bring today?  22 A. I'm not sure if there is or not. I would  23 assume there is, because there's been more work  24 after this date. So I would assume there's more</p>
<p style="text-align: right;">Page 71</p> <p>1 from the strap?  2 A. Correct.  3 Q. Would that be a situation where the user  4 has misused the product?  5 A. No, probably not.  6 Q. Okay. So it can also be by an accident?  7 A. Yes.  8 Q. It can be by no fault of the user?  9 A. Correct.  10 Q. You mentioned earlier that part of your job  11 is to communicate to Ferno any potential design  12 issues, take snapshots, whatever. Can you recall  13 any circumstances where you've done that in the last  14 couple of years?  15 A. Yes.  16 Q. Can you describe them for me?  17 A. The ratchet bars on that 35P that I was  18 talking to you about, I've seen some abnormal wear  19 that I took pictures of. I'm not sure I actually --  20 I think I did send them to Ferno. Mainly I sent  21 them over to our head technician in Ohio.  22 Q. And you took photographs, you said?  23 A. Correct.  24 Q. Any other circumstances that you can recall</p>	<p style="text-align: right;">Page 73</p> <p>1 paperwork in there.  2 Q. There should, at least, be one of these  3 equipment reports from 2004, right?  4 A. Correct.  5 Q. Would you be willing to produce for us the  6 other documents from that file?  7 A. I don't have the authority to do that, but  8 I don't see where there's a problem in that.  9 Q. If we can agree to that, then we won't have  10 to subpoena somebody to bring the file here.  11 A. Right. I don't see a problem with it.  12 Q. Can we contact you about that?  13 A. The guy to actually contact about that is  14 on vacation for two weeks. You can contact Laurie.  15 She's the actual president. She doesn't really go  16 there much. That's who you would call for  17 authorization.  18 Q. Is she an attorney?  19 A. Yes.  20 Q. So Laurie is the person I should contact  21 about that?  22 A. Yes.  23 Q. The second thing I want to ask you is, what  24 does on demand service mean as opposed to scheduled</p>

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<p style="text-align: right;">Page 74</p> <p>1 maintenance?</p> <p>2 A. Scheduled maintenance normally is if we do</p> <p>3 something year to year to year to year, then it</p> <p>4 would become habitual as a scheduled maintenance</p> <p>5 type thing. On demand service, that was the first</p> <p>6 time we ever visited the customer. They called and</p> <p>7 demanded service. That's what that would mean.</p> <p>8 Q. And the last thing I wanted to ask you is,</p> <p>9 if the straps sometimes are causing the auxiliary</p> <p>10 locks to bend, is that something that could be</p> <p>11 prevented by putting some device to hold the straps</p> <p>12 in a different position?</p> <p>13 A. I guess you could say that. I would say</p> <p>14 that.</p> <p>15 Q. Okay. Has there been any work done to</p> <p>16 devise something that would keep the straps from</p> <p>17 bending the auxiliary locks?</p> <p>18 A. No.</p> <p>19 Q. Has that been anything that's been reported</p> <p>20 to EMSAR corporate or to Ferno to call that to their</p> <p>21 attention?</p> <p>22 A. No. Like I said, that's pure speculation</p> <p>23 that that is even a problem. That's what we assume</p> <p>24 the problem could be when we arrive on site. A</p>	<p style="text-align: right;">Page 76</p> <p>1 MR. LEEDBERG: I don't have anything</p> <p>2 either.</p> <p>3 (Whereupon the deposition</p> <p>4 concluded at 4:38 p.m.)</p> <p>5</p> <p>6</p> <p>7</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>
<p style="text-align: right;">Page 75</p> <p>1 restraint was just an example of what I had given</p> <p>2 you that could possibly get in there and bend</p> <p>3 something like that.</p> <p>4 Q. All right. Well, the metal is what? Is it</p> <p>5 steel?</p> <p>6 A. Yes. Quarter-inch steel.</p> <p>7 Q. So aren't the solutions to the problem</p> <p>8 either to fabricate a piece of metal that won't bend</p> <p>9 from pressure or to remove the strap from --</p> <p>10 A. The only one that could actually do that</p> <p>11 would be Ferno itself. That would have to be</p> <p>12 factory authorized.</p> <p>13 Q. I understand that. But doesn't that come</p> <p>14 down to a problem that has to be reported to them to</p> <p>15 say, look, either we've got to keep the straps from</p> <p>16 doing this, if that's what's causing it, otherwise</p> <p>17 we need a piece of metal that won't bend under</p> <p>18 pressure?</p> <p>19 A. Yes.</p> <p>20 Q. But as far as you know, nobody has brought</p> <p>21 that to Ferno's attention?</p> <p>22 A. No.</p> <p>23 MR. DURSO: Okay. I don't have anything</p> <p>24 else.</p>	<p style="text-align: right;">Page 77</p> <p>1 C E R T I F I C A T E</p> <p>2 I, PAUL A. BONANG, JR., do hereby certify</p> <p>3 that I have read the foregoing transcript of my</p> <p>4 testimony, and further certify that it is a true and</p> <p>5 accurate record of my testimony (with the exception</p> <p>6 of the corrections listed below):</p> <p>7 Page Line Correction</p> <p>8</p> <p>9</p> <p>10</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19 Signed under the pains and penalties of perjury</p> <p>20 this day of , 2006.</p> <p>21</p> <p>22 PAUL A. BONANG, JR.</p> <p>23</p> <p>24</p>

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## 1 CERTIFICATE

2 Commonwealth of Massachusetts  
3 Suffolk, ss.  
4

5 I, Michael D. O'Connor, Registered Professional  
6 Reporter and Notary Public in and for the  
7 Commonwealth of Massachusetts, do hereby certify  
8 that PAUL A. BONANG, JR., the witness whose  
9 deposition is hereinbefore set forth, was duly sworn  
10 by me and that such deposition is a true record of  
11 the testimony given by the witness.

12 I further certify that I am neither related to  
13 or employed by any of the parties in or counsel to  
14 this action, nor am I financially interested in the  
15 outcome of this action.

16 In witness whereof, I have hereunto set my hand  
17 and seal this 15th day of August, 2006.  
18

19  
20 Notary Public  
21

22  
23 My commission expires  
24 November 7, 2008

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**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 8**  
**Plaintiff's Initial Discovery Disclosures**

UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MASSACHUSETTS

Case No. 05-11454 RGS

JOSEPH H. KORAN, and KIMBERLY )  
KORAN, Individually and on Behalf of )  
ANA KORAN, JOSEPH KORAN, JR. )  
and ERIK KORAN, Minors, )  
 )  
Plaintiffs )  
V. )  
 )  
ELIZABETH WEAVER, and )  
TOWN OF SHERBORN, )  
 )  
Defendants )

**PLAINTIFF'S DISCLOSURES UNDER  
FED. R. CIV. P. 26(a)(1), LR 26.2(A) & LR 35.1**

**I. FED. R. CIV. P. 26(a)(1) & LR 26.2(A)**

In accordance with Fed. R. Civ. P. 26(a)(1) and LR 26.2(A), plaintiff makes the following disclosures:

A. Individuals likely to have discoverable information relevant to disputed facts:

NAME:	ADDRESS:	SUBJECT
Joseph Koran	6101 Twain Drive New Market, MD 21774	Facts/Medical/Damages
Kimberly Koran	6101 Twain Drive New Market, MD 21774	Medical/Damages
Robert Tiso, M.D.	New York Pain Center 7209 Buckley Road, Ste. 2R Liverpool, NY 13088	Medical
James A. Dispenza, M.D.	North Medical, P.C. 5100 West Taft Rd., Ste. 10 Liverpool, NY 13088	Medical

Felipe Diaz, M.D.	5586 Legionnaire Drive Cicero, NY 13039	Medical
Warren Wulff, M.D.	Syracuse Ortho. Specialists 4115 Medical Center Drive Fayetteville, NY 13066	Medical
Joseph Catania, M.D.	New York Pain Center 7209 Buckley Rd., Ste. 2R Liverpool, NY 13088	Medical
Sergio Zappala, P.T.	CNY Physical Therapy & AquaticCenters 5700 W. Genesee St. Camilus, NY 13031	Medical
Clyde Satterly, M.D.	Lakeshore Family Medicine 6221 Route 31 - Ste. 108 Cicero, NY 13039	Medical
Harvey Sauer, M.D.	Urology Consultants of Syracuse Medical 739 Irving Avenue - Ste. 600 Syracuse, NY 13210	

B. Documents produced/identified because they are believed to be relevant to disputed facts:

**DESCRIPTION/CATEGORY:**

**LOCATION:**

**Medical Records**

Sherborn Fire Dept. EMS	Produced
Robert Tiso, M.D. (NY Pain Center)	Produced
James A. Dispenza, M.D. (Carebest Internal Med.)	Produced
Felipe Diaz, M.D. (Carebest Internal Med.)	Produced
Warren Wulff, M.D. (Syracuse Orthopedic)	Produced
Joseph Catania, M.D.	Identified
Sergio Zappala, P.T.	Produced



Clyde Satterly, M.D. Identified

Harvey Sauer, M.D. Identified

Medical Bills

-Warren Wulff, M.D. Produced

-Syracuse Orthopedic Specialists Produced

-Sherborn Fire Dept. Produced

-Magnetic Diagnostic Resources Produced

-New York Pain Center Produced

-CNY Physical Therapy Aquatic Centers Produced

-Carebest Internal Medicine Produced

-North Medical, P.C. Identified

-Magnetic Diagnostic Resources of Central NY Identified

-Clyde Satterly, M.D. Identified

-Harvey Sauer, M.D. Identified

C. Computation of the categories of damages suffered by plaintiff in this action, and the production/identification of relevant documents:

1. Medical Expenses: (Incomplete)
2. Future Medical Expenses: As yet, undetermined.
3. Lost Wages: Not computed as yet.
4. Future Lost Wages: Undetermined.
5. Lost Earning Capacity: Past and future, undetermined.
6. Pain and Suffering: Plaintiff continues to suffer with severe back pain. He expects to undergo back surgery in the near future.
7. Permanent loss or impairment of a bodily function: This will be supplemented.

8. Substantial disfigurement: Plaintiff will have scarring after he undergoes the necessary back surgery.

D. Plaintiff has received, and continues to receive, Worker's Compensation benefits, for which there will be a lien.

## II. LR 35.1

In accordance with LR 35.1, plaintiff makes the following disclosure of medical information:

### 1. Itemized Medical Expenses: (Incomplete)

a.	Sherborn Fire Dept. EMS 2/6/03	\$ 348.40
b.	NY Pain Center (8/8/03-12/11/03)	2,319.51
c.	St. Joseph's Imaging Assoc. (2/10/03-10/29/03)	650.00
d.	Magnetic Diagnostic Resource (2/12/03)	2,000.00
e.	CYN Physical Therapy (3/7/03-7/16/03)	1,096.98
f.	Carebest Internal Medicine ( 2/10/03-3/24/03)	421.00
g.	Syracuse Ortho Specialists (7/17/03-11/18/03)	270.00

### 2A. Non-Privileged Medical Records (Produced):

a.	Robert Tiso, M.D.	Produced
b.	James A. Dispenza, M.D.	Produced
c.	Felipe Diaz, M.D.	Produced
d.	Warren Wulff, M.D.	Produced
e.	Sergio Zappala, P.T.	Produced
f.	Sherborn Fire Dept. EMS	Produced

### 2B. Non-Privileged Medical Records (Identified):

- a. Joseph Catania, M.D. Identified
- b. Clyde Satterly, M.D. Identified
- c. Harvey Sauer, M.D. Identified
- 3. **Privileged Medical Records:** None.

By his Attorney,




CARMEN L. DURSO, ESQUIRE  
B.B.O. # 139340  
Suite 3232  
100 Summer Street  
Boston, MA 02110-2104  
(617) 728-9123

#### CERTIFICATE OF SERVICE

I, Carmen L. Durso, attorney for plaintiffs, hereby certify that I served Plaintiff's Disclosures Under Fed.R.Civ.P. 26a)(1), LR 26.2(A) and LR 35.1 on the parties, by delivering a copy, in hand, to Darlene Tonucci, Esquire, Pierce, Davis & Perritano, LLP, 10 Winthrop Square, Boston, MA 02110 and to Dragan A. Cetkovic, Esquire, Black, Cetkovic & Whitestone, 200 Berkeley Street, Boston, MA 02116.

DATED: November 30, 2005

  
CARMEN L. DURSO, ESQUIRE

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 9**  
**Fire Captain Pamela Dowse's Deposition**





Pamela J. Dowse

10/17/2006

1

UNITED STATES DISTRICT COURT

DISTRICT OF MASSACHUSETTS

C.A. No. 05-11454-RGS

\*\*\*\*\*

JOSEPH H. KORAN and KIMBERLY

KORAN, Individually and on Behalf

of ANA KORAN, JOSEPH KORAN, JR.,

and ERIK KORAN, Minors,

Plaintiffs,

v.

ELIZABETH WEAVER and TOWN OF

SHERBORN,

Defendants.

\*\*\*\*\*

DEPOSITION OF PAMELA J. DOWSE, a

witness called on behalf of the Plaintiffs,

taken pursuant to the Federal Rules of Civil

Procedure, before Maureen O'Connor Pollard, RPR,

CLR, and Notary Public within and for the

Commonwealth of Massachusetts, at the offices of

Sherborn Fire Department, 22 North Main Street,

Sherborn, Massachusetts, on the 17th of October,

2006, commencing at 12:02 o'clock p.m.

Pamela J. Dowse

10/17/2006

1 APPEARANCES:	1 PROCEEDINGS
2 FOR THE PLAINTIFF:	2
3 BY: MATTHEW P. COLETTI, ESQ.	3 PAMELA J. DOWSE,
4 CARMEN L. DURSO, ESQ.	4 having been identified by Attorney Leedberg,
5 LAW OFFICE OF CARMEN L. DURSO	5 being first duly sworn, was examined and
6 175 Federal Street	6 testified as follows:
7 Boston, Massachusetts 02110-2241	7 MR. LEEDBERG: I'll vouch for the fact
8 617-728-9212	8 that this is Pamela Dowse. She didn't have a
9 dursolaw@tiac.net	9 photo ID, and it's my fault for not telling her
10	10 to bring one. I'll vouch for the fact that is
11 FOR THE DEFENDANT:	11 Pamela H. Dowse.
12 BY: MICHAEL D. LEEDBERG, ESQ.	12 MR. COLETTI: Works for me.
13 PIERCE, DAVIS & PERRITANO, LLP	13 DIRECT EXAMINATION
14 Ten Winthrop Square	14 BY MR. COLETTI:
15 Boston, Massachusetts 02110-1257	15 <b>Q. We're here for a deposition. Have you</b>
16 617-350-0950	16 <b>ever taken one before?</b>
17 mleedberg@piercedavis.com	17 A. No.
18	18 <b>Q. What's going to happen is I'm going to</b>
19	19 <b>ask questions, and they may be followed up by</b>
20	20 <b>others here, and you answer them to the best of</b>
21	21 <b>your memory. And no need to guess, no need to</b>
22	22 <b>estimate, just what you can remember.</b>
23	23 <b>There will be objections throughout</b>
24	24 <b>it, most likely. Just continue to answer and</b>
2	4
1 INDEX	1 speak right through them unless instructed
2 EXAMINATION PAGE	2 otherwise.
3 PAMELA J. DOWSE	3 And we'll just not to talk over each
4 BY MR. COLETTI 4	4 other. And don't anticipate my full question,
5	5 just see if you can wait until I ask the whole
6 EXHIBITS	6 thing and give your response. And try to
7 NO. DESCRIPTION PAGE	7 refrain from using gestures or head nods or
8 1 Memorandum..... 14	8 anything along those lines, and just answer
9	9 verbally as often as you can. That makes it all
10 **EXHIBITS RETAINED BY ATTORNEY COLETTI**	10 easier for the stenographer.
11	11 We'll start with the basics. Your
12	12 name is Pamela Dowse?
13	13 A. Yes.
14	14 <b>Q. Could you spell that for the record,</b>
15	15 <b>please?</b>
16	16 A. P-A-M-E-L-A, D-O-W-S-E.
17	17 <b>Q. And we met your husband Jon.</b>
18	18 A. Okay.
19	19 <b>Q. You guys are married?</b>
20	20 A. Yes.
21	21 <b>Q. Children; how many?</b>
22	22 A. Yes.
23	23 What does that have to do with
24	24 anything?
3	5

2 (Pages 2 to 5)

Pamela J. Dowse

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<p>1 MR. LEEDBERG: Just a little 2 background. 3 BY MR. COLETTI: 4 <b>Q. Just background questions.</b> 5 A. Want to take them? 6 Two. 7 <b>Q. And your age, if you could tell us?</b> 8 A. Thirty-seven. 9 <b>Q. Your date of birth?</b> 10 A. 8-8-69. 11 <b>Q. And your current address?</b> 12 A. 100 North Main Street here in 13 Sherborn. 14 <b>Q. And are you under any medications</b> 15 <b>today?</b> 16 A. No. 17 <b>Q. Could you quickly tell us about your</b> 18 <b>educational background?</b> 19 A. Yes. As it relates here to the fire 20 department, or just in general? 21 <b>Q. Just generally.</b> 22 A. I have an accounting degree from 23 Northeastern and a masters from Nichols. I'm an 24 EMT Intermediate.</p>	<p>1 <b>administrative assistant here at the department?</b> 2 A. I don't know. I mean I could get the 3 dates, but I don't know off the top of my head. 4 Probably longer than a year. 5 <b>Q. Were you administrative assistant at</b> 6 <b>the time of this incident, which I'll remind you</b> 7 <b>was February of 2003?</b> 8 A. You know, I'm not sure, to be honest, 9 I'm not sure. 10 <b>Q. Do you remember working here in</b> 11 <b>February, 2003?</b> 12 A. At the fire station? 13 <b>Q. Yes.</b> 14 A. Yes. 15 <b>Q. And do you remember what role, if any,</b> 16 <b>you served here during that time?</b> 17 A. Yes, I believe I was still the captain 18 at that point. 19 <b>Q. And that's the captain of EMS?</b> 20 A. Uh-huh. 21 <b>Q. And what were your responsibilities as</b> 22 <b>captain of EMS?</b> 23 A. Responsible for the ambulance and its 24 crew.</p>
<p>1 <b>Q. And that's a certification you refer</b> 2 <b>to, EMT Intermediate?</b> 3 A. Yes, from the state. 4 <b>Q. Have you served in the military at any</b> 5 <b>point?</b> 6 A. No. 7 <b>Q. Could you tell us a bit about your</b> 8 <b>employment history, starting with your most</b> 9 <b>recent occupation?</b> 10 A. I'm an accountant, I work for Siegel &amp; 11 Stacy in Waltham. 12 <b>Q. And for how long have you done that?</b> 13 A. About a year and a half. 14 <b>Q. And prior to that, did you have an</b> 15 <b>occupation?</b> 16 A. Yes. I still currently work at the 17 farm with my husband, that's been ongoing. 18 Maybe a year ago I was the 19 administrative assistant here at the fire 20 station, and I was also the captain of EMS. 21 <b>Q. And --</b> 22 A. Before that I was just with my 23 children. 24 <b>Q. For how long were you an</b></p>	<p>1 <b>Q. Could you be more specific?</b> 2 A. For -- there's a job description. 3 <b>Q. Did you handle communications between</b> 4 <b>the crew?</b> 5 A. Not, you know, amongst the crew, but 6 from officers to the people, yes. 7 <b>Q. What kind of things were communicated</b> 8 <b>from the officers to the people?</b> 9 A. Drills, if we had new equipment or new 10 protocols. 11 <b>Q. Were you responsible for managing</b> 12 <b>supply inventory?</b> 13 A. With the lieutenant and the deputy 14 chief. 15 <b>Q. Were you responsible for handling any</b> 16 <b>personnel profiles or any documentation as</b> 17 <b>associated with the ambulance; incident reports,</b> 18 <b>complaints, notices, memos?</b> 19 MR. LEEDBERG: Objection as to form. 20 Go ahead and answer if you understand 21 the question. 22 A. I don't about the profiling part. 23 But as far as documentation and 24 incident reports, yes, I would review them.</p>

3 (Pages 6 to 9)



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<p>1 BY MR. COLETTI:</p> <p>2 <b>Q. Okay. So do you recall the incident</b></p> <p>3 <b>of February, 2003 that brings us here today?</b></p> <p>4 A. I know of it.</p> <p>5 <b>Q. And how did you come to know of the</b></p> <p>6 <b>incident?</b></p> <p>7 A. I actually don't remember who notified</p> <p>8 me or how I knew of the situation, but I do</p> <p>9 remember knowing about the situation.</p> <p>10 <b>Q. Do you think it's possible that one of</b></p> <p>11 <b>your ambulance crew members notified you about</b></p> <p>12 <b>the incident?</b></p> <p>13 MR. LEEDBERG: Objection.</p> <p>14 Go ahead and answer, if you can.</p> <p>15 A. I would imagine that's how I found</p> <p>16 out, since I wasn't at the call.</p> <p>17 BY MR. COLETTI:</p> <p>18 <b>Q. And the ambulance crew members at the</b></p> <p>19 <b>time, do you remember their names?</b></p> <p>20 A. I believe it was Dominick, Scott, and</p> <p>21 the deputy at the time, I believe.</p> <p>22 <b>Q. Was the deputy at the time Ron</b></p> <p>23 <b>Buckler?</b></p> <p>24 A. Yes.</p> <p style="text-align: right;">10</p>	<p>1 BY MR. COLETTI:</p> <p>2 <b>Q. Did they go into detail, what it is</b></p> <p>3 <b>the issue was about the stretcher?</b></p> <p>4 A. I just asked them to write up a report</p> <p>5 on it so that we had it on file.</p> <p>6 <b>Q. When you say "them," you're referring</b></p> <p>7 <b>to Dominick or Mr. Christianson, or both?</b></p> <p>8 A. The crew that was on.</p> <p>9 <b>Q. And did they follow through and write</b></p> <p>10 <b>a report?</b></p> <p>11 A. I believe so.</p> <p>12 <b>Q. Do you remember receiving the report?</b></p> <p>13 A. I believe so.</p> <p>14 <b>Q. Do you remember in what form it was</b></p> <p>15 <b>received?</b></p> <p>16 A. Like what do you mean, how I got it?</p> <p>17 <b>Q. Was it by e-mail, letter, note, fax,</b></p> <p>18 <b>memo?</b></p> <p>19 A. I think it was a piece of paper.</p> <p>20 <b>Q. And do you recall the contents of the</b></p> <p>21 <b>memo or paper?</b></p> <p>22 A. Right now do I? No.</p> <p>23 <b>Q. It was related to the incident?</b></p> <p>24 A. Mm-hmm. I mean I don't remember what</p> <p style="text-align: right;">12</p>
<p>1 <b>Q. Do you recall being notified about the</b></p> <p>2 <b>incident, in what form you may have been</b></p> <p>3 <b>notified?</b></p> <p>4 A. What do you mean "in what form"?</p> <p>5 <b>Q. Was it a conversation, a telephone</b></p> <p>6 <b>call, possibly an e-mail, a letter?</b></p> <p>7 A. I don't remember how it was.</p> <p>8 <b>Q. Are you able today to recall the</b></p> <p>9 <b>subject of the events of the incident?</b></p> <p>10 MR. LEEDBERG: Objection as to form.</p> <p>11 Go ahead and answer if you understand</p> <p>12 the question.</p> <p>13 A. I don't really.</p> <p>14 BY MR. COLETTI:</p> <p>15 <b>Q. Do you remember, are you able to</b></p> <p>16 <b>recall what happened?</b></p> <p>17 A. Well, I wasn't there. I know what</p> <p>18 they told me what had happened.</p> <p>19 <b>Q. And what did they tell you what</b></p> <p>20 <b>happened?</b></p> <p>21 MR. LEEDBERG: I'm going to object.</p> <p>22 Go ahead and answer, if you can.</p> <p>23 A. That they were at a call, and that</p> <p>24 there was an issue with the stretcher.</p> <p style="text-align: right;">11</p>	<p>1 the paper says.</p> <p>2 Don't you have the paper?</p> <p>3 <b>Q. We may or may not.</b></p> <p>4 MR. LEEDBERG: That's okay. They're</p> <p>5 still okay to question you on it, if you recall.</p> <p>6 THE WITNESS: Okay.</p> <p>7 BY MR. COLETTI:</p> <p>8 <b>Q. Do you recall anything more</b></p> <p>9 <b>specifically about the event?</b></p> <p>10 MR. LEEDBERG: I'm going to object as</p> <p>11 to form.</p> <p>12 Go ahead and answer, if you can.</p> <p>13 A. I mean I wasn't there, so do I</p> <p>14 remember them giving me the paper, or what are</p> <p>15 you asking?</p> <p>16 BY MR. COLETTI:</p> <p>17 <b>Q. Do you remember them giving you the</b></p> <p>18 <b>paper?</b></p> <p>19 A. I remember having something to put in</p> <p>20 the file from them, yes, because I asked them to</p> <p>21 do it.</p> <p>22 <b>Q. Do you remember the contents of it?</b></p> <p>23 A. No.</p> <p>24 <b>Q. Okay. Do you remember receiving any</b></p> <p style="text-align: right;">13</p>

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<p>1 <b>type of complaint arising out of the incident?</b></p> <p>2 A. I remember fielding phone calls.</p> <p>3 <b>Q. And from who did you field phone</b></p> <p>4 <b>calls?</b></p> <p>5 A. I believe they were from Mr. Koran</p> <p>6 calling the fire station.</p> <p>7 <b>Q. Do you remember the subject matter of</b></p> <p>8 <b>those telephone conversations?</b></p> <p>9 A. I remember one of them being that he</p> <p>10 requested the reports from the incident.</p> <p>11 <b>Q. I'm going to show you a memorandum</b></p> <p>12 <b>that we have in our files, and you can take a</b></p> <p>13 <b>minute to review it, if you could, please. And</b></p> <p>14 <b>I'll show it to your attorney as well (handing).</b></p> <p>15 <b>(Witness reviewing document.)</b></p> <p>16 MR. COLETTI: Could I just have that</p> <p>17 marked Exhibit 1, please?</p> <p>18 (Whereupon, P. Dowse Exhibit 1 was</p> <p>19 marked for identification.)</p> <p>20 BY MR. COLETTI:</p> <p>21 <b>Q. Do you recall seeing this memorandum</b></p> <p>22 <b>before?</b></p> <p>23 A. I think so.</p> <p>24 <b>Q. And the handwriting at the bottom of</b></p> <p style="text-align: right;">14</p>	<p>1 A. Do you mean run reports? I don't know</p> <p>2 what you mean by "records."</p> <p>3 <b>Q. Records would include run reports,</b></p> <p>4 <b>they could include things along the lines such</b></p> <p>5 <b>as incident reports, or any complaints or any</b></p> <p>6 <b>maintenance work done on the ambulances.</b></p> <p>7 A. Well, it's different for each of those</p> <p>8 things.</p> <p>9 Run reports are kept, locked up in the</p> <p>10 office by month after they've been sent out for</p> <p>11 billing. If there's any incident reports that</p> <p>12 go along with any run reports they should be</p> <p>13 attached to those, and they're kept in the</p> <p>14 office forever. And as far as maintenance goes,</p> <p>15 we do equipment inventories and that kind of</p> <p>16 stuff, and those are all kept in the ambulance</p> <p>17 files.</p> <p>18 <b>Q. Do you remember seeing any ambulance</b></p> <p>19 <b>maintenance reports around the time of this</b></p> <p>20 <b>incident?</b></p> <p>21 A. After this incident, yes.</p> <p>22 <b>Q. What do you recall seeing in those</b></p> <p>23 <b>maintenance reports after this incident?</b></p> <p>24 A. I don't remember what was in them, but</p> <p style="text-align: right;">16</p>
<p>1 <b>the page, does that look like your handwriting,</b></p> <p>2 <b>or someone else's?</b></p> <p>3 A. Not mine.</p> <p>4 <b>Q. Okay. In looking at the handwriting</b></p> <p>5 <b>at the bottom of the page, or the contents of</b></p> <p>6 <b>the memo, does that refresh your memory at all</b></p> <p>7 <b>as to the specifics of the event?</b></p> <p>8 A. No. This isn't my writing.</p> <p>9 <b>Q. Did you respond to this memorandum?</b></p> <p>10 A. I don't know if it was to this</p> <p>11 memorandum, but I think we sent him his reports.</p> <p>12 <b>Q. Do you remember making any other types</b></p> <p>13 <b>of notes or anything in response to your receipt</b></p> <p>14 <b>of this memorandum?</b></p> <p>15 A. No.</p> <p>16 <b>Q. All right. Could you describe for us,</b></p> <p>17 <b>please, the process for maintenance of records</b></p> <p>18 <b>at the time?</b></p> <p>19 A. Maintenance of what records?</p> <p>20 <b>Q. Of department records.</b></p> <p>21 A. For what?</p> <p>22 <b>Q. Generally any records that came in or</b></p> <p>23 <b>out of the department, how were they stored or</b></p> <p>24 <b>kept.</b></p> <p style="text-align: right;">15</p>	<p>1 I know that we had somebody come out to look at</p> <p>2 it.</p> <p>3 <b>Q. And who do you remember came out to</b></p> <p>4 <b>look at it?</b></p> <p>5 A. I don't remember their name. EMSAR or</p> <p>6 North Star or something like that, whatever the</p> <p>7 name of the company is.</p> <p>8 <b>Q. Do you remember having any</b></p> <p>9 <b>conversations with the people who came out to</b></p> <p>10 <b>inspect?</b></p> <p>11 A. No.</p> <p>12 <b>Q. Do you remember changing the practices</b></p> <p>13 <b>of the ambulance supply after the ambulance --</b></p> <p>14 <b>after EMSAR came out to inspect the stretcher?</b></p> <p>15 A. Changing the practice of what?</p> <p>16 <b>Q. Did you have practices in place for</b></p> <p>17 <b>managing the supplies within the ambulance or</b></p> <p>18 <b>inspecting supplies within the ambulance prior</b></p> <p>19 <b>to the incident?</b></p> <p>20 A. Yes.</p> <p>21 <b>Q. And do you recall what those practices</b></p> <p>22 <b>were?</b></p> <p>23 A. We have inventory sheets that each</p> <p>24 crew is supposed to fill out, and we keep those</p> <p style="text-align: right;">17</p>

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<p>1 on file, and we still do that.</p> <p>2 <b>Q. Do you recall after the incident where</b></p> <p>3 <b>those practices changed?</b></p> <p>4 MR. LEEDBERG: I'm going to object.</p> <p>5 Go ahead and answer, if you can.</p> <p>6 A. No, we still doing the same things.</p> <p>7 BY MR. COLETTI:</p> <p>8 <b>Q. If I were to suggest to you that at</b></p> <p>9 <b>some point you had received an e-mail from</b></p> <p>10 <b>Dominick Tolson, would that refresh your memory</b></p> <p>11 <b>as to either receiving one, or the events of the</b></p> <p>12 <b>incident?</b></p> <p>13 A. No.</p> <p>14 MR. LEEDBERG: Objection.</p> <p>15 Go ahead and answer.</p> <p>16 BY MR. COLETTI:</p> <p>17 <b>Q. Did you normally receive e-mail</b></p> <p>18 <b>correspondence from your crew members in your</b></p> <p>19 <b>role as captain of EMS?</b></p> <p>20 A. Yes.</p> <p>21 <b>Q. And in that process, typically how</b></p> <p>22 <b>were they received via e-mail? Did you have a</b></p> <p>23 <b>department account, a personal account?</b></p> <p>24 A. Both at the time.</p> <p style="text-align: right;">18</p>	<p>1 <b>captain of EMS, do you recall having any</b></p> <p>2 <b>conversations with Ron Buckler or your crew</b></p> <p>3 <b>members regarding the operation of the stretcher</b></p> <p>4 <b>at the time of the incident?</b></p> <p>5 A. I have to be certain that we did, but</p> <p>6 I can't tell you when or what it was.</p> <p>7 <b>Q. Do you recall having any conversations</b></p> <p>8 <b>arising after the time of the incident?</b></p> <p>9 MR. LEEDBERG: Objection as to form.</p> <p>10 You can answer, if you can.</p> <p>11 A. Any -- ask it again?</p> <p>12 BY MR. COLETTI:</p> <p>13 <b>Q. Do you recall having any conversations</b></p> <p>14 <b>with your crew members after the time of</b></p> <p>15 <b>incident regarding the functioning of</b></p> <p>16 <b>stretchers?</b></p> <p>17 A. No.</p> <p>18 <b>Q. At any time during your post as</b></p> <p>19 <b>captain of EMS, do you recall any incidents</b></p> <p>20 <b>where a stretcher had malfunctioned?</b></p> <p>21 A. No.</p> <p>22 MR. COLETTI: Do you mind if I take a</p> <p>23 moment to look through my exhibits and what I</p> <p>24 have here?</p> <p style="text-align: right;">20</p>
<p>1 <b>Q. And with which account did you</b></p> <p>2 <b>normally converse with your crew members?</b></p> <p>3 A. Both.</p> <p>4 <b>Q. And these accounts, were they</b></p> <p>5 <b>primarily operated through your home computer or</b></p> <p>6 <b>the department computer?</b></p> <p>7 A. Both, one of each.</p> <p>8 <b>Q. Do you still have access to the</b></p> <p>9 <b>computer that you used primarily at your home in</b></p> <p>10 <b>2003?</b></p> <p>11 A. I think it's the same one.</p> <p>12 <b>Q. Have you made any attempts prior to</b></p> <p>13 <b>this deposition today to look through any of</b></p> <p>14 <b>your prior correspondence with your ambulance</b></p> <p>15 <b>crew members?</b></p> <p>16 A. No.</p> <p>17 <b>Q. Do you maintain records of your prior</b></p> <p>18 <b>correspondence with ambulance crew members?</b></p> <p>19 A. From 2003? No.</p> <p>20 <b>Q. At what time did your post as captain</b></p> <p>21 <b>of EMS expire?</b></p> <p>22 A. I can't be sure of the exact date, but</p> <p>23 maybe six months ago. It was recent.</p> <p>24 <b>Q. So in that time in your post as</b></p> <p style="text-align: right;">19</p>	<p>1 MR. LEEDBERG: No.</p> <p>2 (Whereupon, a recess was taken from</p> <p>3 12:22 p.m. to a 12:24 p.m.)</p> <p>4 BY MR. COLETTI:</p> <p>5 <b>Q. At some point do you recall learning</b></p> <p>6 <b>about the malfunctioning of the stretcher?</b></p> <p>7 MR. LEEDBERG: Objection as to form.</p> <p>8 Go ahead and answer, if you can.</p> <p>9 A. I remember hearing about the incident.</p> <p>10 BY MR. COLETTI:</p> <p>11 <b>Q. And in hearing about the incident, do</b></p> <p>12 <b>you recall whether it was about the</b></p> <p>13 <b>malfunctioning of the stretcher?</b></p> <p>14 MR. LEEDBERG: Objection as to form.</p> <p>15 Go ahead and answer, if you can.</p> <p>16 A. Yes, it involved the stretcher.</p> <p>17 BY MR. COLETTI:</p> <p>18 <b>Q. Do you recall at that time that the</b></p> <p>19 <b>stretcher was taken out of use?</b></p> <p>20 A. No, I don't recall.</p> <p>21 <b>Q. So in hearing that the stretcher was</b></p> <p>22 <b>the subject of an incident, did you hear about</b></p> <p>23 <b>any possible repairs that were taken or made?</b></p> <p>24 A. Yes.</p> <p style="text-align: right;">21</p>

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<p>1 <b>Q. What, if anything, did you hear about</b>  2 <b>those repairs?</b>  3 MR. LEEDBERG: Objection as to form.  4 Go ahead and answer, if you can.  5 A. I asked for the written report of what  6 happened, and I called the stretcher company who  7 then referred us to that EMSAR, whatever the  8 name of the repair company is, to come out. And  9 then Jon, I believe, was here when they came to  10 look over the stretcher.  11 BY MR. COLETTI:  12 <b>Q. You asked for a written report from</b>  13 <b>whom?</b>  14 A. The duty team.  15 <b>Q. And the duty team includes?</b>  16 A. The same people as last time,  17 Dominick, Scott and Ron.  18 <b>Q. And they sent you a report?</b>  19 A. I believe so.  20 <b>Q. Do you recall the contents of that</b>  21 <b>report?</b>  22 A. No.  23 <b>Q. Did you learn, after the incident did</b>  24 <b>you learn any more specifically about the</b></p> <p style="text-align: right;">22</p>	<p>1 <b>Q. Yes.</b>  2 A. Correct. I wouldn't have anything  3 from 2003 on my computer.  4 <b>Q. And why is that?</b>  5 A. Because it's 2006, my e-mail probably  6 doesn't hold three years' worth of e-mails.  7 <b>Q. Did you have a practice of saving your</b>  8 <b>e-mails to your hard drive?</b>  9 A. No.  10 <b>Q. So any correspondence you would have</b>  11 <b>had with your crew members would have been</b>  12 <b>through the e-mail accounts alone?</b>  13 MR. LEEDBERG: Objection as to form.  14 Is there a question?  15 BY MR. COLETTI:  16 <b>Q. Let me strike that question.</b>  17 <b>The correspondence you would have had</b>  18 <b>with your crew members would have been stored on</b>  19 <b>your e-mail accounts alone, correct?</b>  20 A. I'm not sure. Are you asking if  21 that's the only way that I speak to them?  22 <b>Q. If you were to speak to your crew</b>  23 <b>members through e-mail correspondence, how would</b>  24 <b>you store those records?</b></p> <p style="text-align: right;">24</p>
<p>1 <b>malfunctioning of the stretcher?</b>  2 MR. LEEDBERG: Objection as to form.  3 Go ahead and answer, if you can.  4 A. I'm not sure I know what you're  5 asking. I'm sure that the report that they  6 wrote for me said what it was that happened. I  7 just don't -- I don't have it here in front of  8 me, I couldn't tell you what it said.  9 BY MR. COLETTI:  10 <b>Q. So you don't recall any more</b>  11 <b>specifically the details of the malfunctioning</b>  12 <b>of the stretcher?</b>  13 MR. LEEDBERG: Objection as to form.  14 Go ahead and answer.  15 A. No.  16 BY MR. COLETTI:  17 <b>Q. Earlier we had discussed your use of</b>  18 <b>e-mail in corresponding with crew members,</b>  19 <b>correct?</b>  20 A. Yes.  21 <b>Q. And you had said that you hadn't made</b>  22 <b>an attempt to locate any prior correspondence</b>  23 <b>with any crew members, is that accurate?</b>  24 A. Regarding this case?</p> <p style="text-align: right;">23</p>	<p>1 A. Just on my e-mail.  2 <b>Q. And you're unable to locate those</b>  3 <b>e-mails as of today?</b>  4 MR. LEEDBERG: Objection as to form.  5 Go ahead and answer, if you can.  6 A. I don't have them.  7 BY MR. COLETTI:  8 <b>Q. Okay. How is it that you know that</b>  9 <b>those e-mails do not exist stored in your e-mail</b>  10 <b>account?</b>  11 A. From 2003?  12 <b>Q. Yes.</b>  13 A. Because I don't think I can hold that  14 many e-mails.  15 <b>Q. Have you made an attempt to look</b>  16 <b>through the e-mail account prior to the</b>  17 <b>deposition today?</b>  18 A. No.  19 <b>Q. Are you willing to look through the</b>  20 <b>e-mail accounts to see if any e-mail</b>  21 <b>correspondence regarding this incident are</b>  22 <b>stored therein?</b>  23 A. Yes.  24 MR. LEEDBERG: I'll consult with my</p> <p style="text-align: right;">25</p>

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<p>1 client to see what was done. As I represented  2 to you earlier, there has been an effort to  3 search, I'm not sure if that was through the  4 department e-mail with the chief, but I'll make  5 another effort and supplement whatever discovery  6 I need to.  7 MR. COLETTI: Fair enough.  8 BY MR. COLETTI:  9 <b>Q. So just one last time, you don't --</b>  10 <b>did you at any time learn specifically the</b>  11 <b>reasons for the malfunctioning of the stretcher?</b>  12 MR. LEEDBERG: Objection as to form.  13 Go ahead and answer, if you can.  14 A. I'm sure that I did, but without going  15 back to refresh my memory --  16 BY MR. COLETTI:  17 <b>Q. You said that you had contacted EMSAR</b>  18 <b>about inspection and repair of the stretcher.</b>  19 A. Yes.  20 <b>Q. Do you recall what repairs were made</b>  21 <b>to the stretcher?</b>  22 A. No.  23 <b>Q. Did you handle the invoicing, the</b>  24 <b>maintenance of invoice records at that time for</b></p> <p style="text-align: right;">26</p>	<p>1 MR. COLETTI: I think we'll take a  2 short break and see if there's anything else.  3 Nothing?  4 I have nothing further.  5 MR. LEEDBERG: I have nothing further.  6 (Whereupon, the deposition was  7 concluded at 12:33 p.m.)  8  9  10  11  12  13  14  15  16  17  18  19  20  21  22  23  24</p> <p style="text-align: right;">28</p>
<p>1 <b>the department?</b>  2 MR. LEEDBERG: Object as to form.  3 Do you understand the question?  4 THE WITNESS: No.  5 BY MR. COLETTI:  6 <b>Q. The department had outside contractors</b>  7 <b>perform work on the stretcher, correct, EMSAR?</b>  8 A. Yes.  9 <b>Q. Did they invoice you for their work?</b>  10 A. I would imagine so.  11 <b>Q. Do you remember at any point seeing</b>  12 <b>these invoices?</b>  13 A. I must have.  14 <b>Q. Do you remember the contents of the</b>  15 <b>invoices?</b>  16 A. No.  17 <b>Q. Do you have any recollection as to any</b>  18 <b>repairs undertaken by this department of the</b>  19 <b>stretcher?</b>  20 A. No.  21 <b>Q. Do you have any recollection of any</b>  22 <b>suggestions of repairs made by crew members or</b>  23 <b>anyone in the department about the stretcher?</b>  24 A. No.</p> <p style="text-align: right;">27</p>	<p>1 ERRATA SHEET DISTRIBUTION INFORMATION  2 DEPONENT'S ERRATA &amp; SIGNATURE INSTRUCTIONS  3  4 ERRATA SHEET DISTRIBUTION INFORMATION  5 The original of the Errata Sheet has  6 been delivered to Michael D. Leedberg, Esquire.  7 When the Errata Sheet has been  8 completed by the deponent and signed, a copy  9 thereof should be delivered to each party of  10 record and the ORIGINAL forwarded to Matthew P.  11 Coletti, Esquire, to whom the original  12 deposition transcript was delivered.  13 INSTRUCTIONS TO DEPONENT  14 After reading this volume of your  15 deposition, please indicate any corrections or  16 changes to your testimony and the reasons  17 therefor on the Errata Sheet supplied to you and  18 sign it. DO NOT make marks or notations on the  19 transcript volume itself. Add additional sheets  20 if necessary. Please refer to the above  21 instructions for Errata Sheet distribution  22 information.  23  24</p> <p style="text-align: right;">29</p>

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<p>1 ATTACH TO DEPOSITION OF PAMELA J. DOWSE</p> <p>2 CASE: Koran v Weaver and Town of Sherborn</p> <p>3 DATE TAKEN: 10-17-06</p> <p>4 ERRATA SHEET</p> <p>5 Please refer to page 29 for errata sheet</p> <p>6 instructions and distribution instructions.</p> <p>7 PAGE LINE CHANGE REASON</p> <p>8 _____</p> <p>9 _____</p> <p>10 _____</p> <p>11 _____</p> <p>12 _____</p> <p>13 _____</p> <p>14 _____</p> <p>15 I have read the foregoing transcript</p> <p>16 of my deposition and except for any corrections</p> <p>17 or changes noted above, I hereby subscribe to</p> <p>18 the transcript as an accurate record of the</p> <p>19 statements made by me.</p> <p>20</p> <p>21 Executed this ____ day of _____, 2006.</p> <p>22</p> <p>23 _____</p> <p>24 PAMELA J. DOWSE</p> <p style="text-align: right;">30</p>	
<p>1 COMMONWEALTH OF MASSACHUSETTS )</p> <p>2 SUFFOLK, SS. )</p> <p>3</p> <p>4 I, MAUREEN O'CONNOR POLLARD, RPR, CLR,</p> <p>5 and Notary Public in and for the Commonwealth of</p> <p>6 Massachusetts, do certify that on the 17th day</p> <p>7 of October, 2006, at 12:02 o'clock, the person</p> <p>8 above-named was duly sworn to testify to the</p> <p>9 truth of their knowledge, and examined, and such</p> <p>10 examination reduced to typewriting under my</p> <p>11 direction, and is a true record of the testimony</p> <p>12 given by the witness. I further certify that I</p> <p>13 am neither attorney, related or employed by any</p> <p>14 of the parties to this action, and that I am not</p> <p>15 a relative or employee of any attorney employed</p> <p>16 by the parties hereto, or financially interested</p> <p>17 in the action.</p> <p>18 In witness whereof, I have hereunto</p> <p>19 set my hand this 23rd day of October, 2006.</p> <p>20</p> <p>21 _____</p> <p>22 REGISTERED PROFESSIONAL REPORTER</p> <p>23</p> <p>24</p> <p style="text-align: right;">31</p>	

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Town 1:11 30:2	wrote 23:6	
transcript 29:12,19 30:15,18	Y	
true 31:11	year 7:13,18 8:4	
truth 31:9	years 24:6	
try 5:6	0	
Two 6:6	02110-1257 2:15	
type 14:1	02110-2241 2:7	
types 15:12	05-11454-RGS 1:3	
typewriting 31:10	1	
typically 18:21	1 3:8 14:17,18	
U	10-17-06 30:3	
Uh-huh 8:20	100 6:12	
unable 25:2	12:02 1:23 31:7	
understand 9:20 11:11 27:3	12:22 21:3	
undertaken 27:18	12:24 21:3	
UNITED 1:1	12:33 28:7	
use 21:19 23:17	14 3:8	
V	17th 1:22 31:6	
v 1:10 30:2	175 2:6	
verbally 5:9	2	
volume 29:14,19	2003 8:7,11 10:3 19:10 19:19 24:3 25:11	
	2006 1:23 24:5 30:21 31:7,19	
	22 1:21	
	23rd 31:19	

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 10**  
**Affidavit of Fire Chief Neil McPherson**



UNITED STATES DISTRICT COURT  
DISTRICT OF MASSACHUSETTS

CIVIL ACTION No. 05-11454 RGS

\_\_\_\_\_  
JOSEPH H. KORAN, and KIMBERLY KORAN, )  
Individually and on Behalf of ANA KORAN, )  
JOSEPH KORAN, JR. and ERIK KORAN, Minors, )  
Plaintiffs, )  
v. )  
ELIZABETH WEAVER and )  
TOWN OF SHERBORN, )  
Defendants. )  
\_\_\_\_\_

**AFFIDAVIT OF NEIL MCPHERSON**

I, Neil McPherson, hereby state and depose under the penalties of perjury:

- 1) I am over the age of eighteen years, and understand the obligations of an oath.
- 2) Since December, 2002 I have held the position of Chief of Sherborn Fire & Rescue, where I have worked in various capacities since 1989.
- 3) At Sherborn Fire & Rescue, we have used the same ambulance cot, a Model 93ES Squadmate Ambulance Cot, since the Town purchased it new in 1997 and it had performed flawlessly up until February 6, 2003.
- 4) The cot undergoes regular inspections by staff and annual inspections by the Massachusetts Department of Public Health, and no inspection has ever revealed any problems with the ambulance cot.
- 5) I used the department's cot on February 5, 2003 during an emergency medical services call, and it functioned flawlessly as it always had up until that point.
- 6) To the best of my knowledge and belief, the Town had no knowledge that an auxiliary lock lever on the cot was bent until February 7, 2003, when it was reportedly discovered by Deputy Chief Jonathan Dowse during a post-incident inspection.
- 7) The Town is aware of no evidence as to how or when the auxiliary lock lever was bent.

- 8) The auxiliary lock lever was replaced by a manufacturer certified technician on February 12, 2003, and the cot has performed flawlessly to present day.
- 9) The staff at Sherborn Fire & Rescue routinely performs ambulance supply inventories, and sometimes fills out Ambulance Checklists when this is done, and no problems with the cot had ever been reported.
- 10) The staff removes the cot from the ambulance and places it back in when conducting ambulance supply inventories, and would notice if the cot was not functioning properly.
- 11) The Massachusetts Department of Public Health ["MDPH"] Licensing Division conducted mandatory annual inspections of all of the defendant's Fire Department's equipment, including visual and functional inspections of the cot, and no such inspection ever revealed a problem with the cot.
- 12) I have made the appropriate inquiries, and found no evidence that any Town of Sherborn department, office or employee received any correspondence from Kimberly Koran, Ana Koran, Joseph Koran, Jr. and Erik Koran, or a representative thereof, purporting to be their presentment in compliance with the Massachusetts Tort Claims Act.
- 13) I have reviewed the enclosed documents comprised of Ambulance Checklists from 2/22/01 to 2/2/03 (attached to Motion for Summary Judgment as Exhibit 11), and attest that they are true and accurate copies of all such checklists recorded by Sherborn Fire & Rescue staff within that time period, although since the checklists are not always filled out, I am certain that many more such inventories were performed than are represented by these checklists.
- 14) I have review the enclosed documents comprised of Massachusetts Department of Public Health Ambulance Inspection Report Forms from 2/10/97-4/4/03 (attached to Motion for Summary Judgment as Exhibit 12), and attest that they are true and accurate copies of all state inspections performed on the cot in question during the given time period.
- 15) I have reviewed the enclosed document entitle, "Sherborn Fire & Rescue Department Fire and EMS Combined List By Incident Number" (attached to Motion for Summary Judgment as Exhibit 14), and attest that it is a true and accurate copy of our response log from the dates of 1/1/03-3/1/03, and that I was on call
- 16) I have reviewed the document entitled, "Model 93ES Squadmate Ambulance Cot Users' Manual" (attached to Motion for Summary Judgment as Exhibit 6), and attest that it is a true and accurate copy of the users' manual provided by the manufacturer for the Model 93ES Squadmate Ambulance Cot purchased by the SFRD in 1997.

Signed under the penalties and pains of perjury on this, the 24 day of December,  
2006.

Neil W. McPherson

Neil McPherson, Chief  
Sherborn Fire & Rescue

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 11**  
**Ambulance Checklists**



# **AMBULANCE CHECKLIST**

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by:

Date:

<b>STRETCHER</b>	<b>Required</b>	<b>On Hand</b>
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) set	1	1
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	1000
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	
Regulator / flow meter	1	
Adult, Child, Infant Face Mask for Resuscitators	2 each	
Adult Non-Rebreathers w/tubing	2	
Adult Simple Face masks w/tubing	2	
Adult Nasal Cannulas	2	
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

<b>ON BOARD E.M.S. SUPPLIES</b>	<b>Required</b>	<b>On Hand</b>
Adult Traction Splint	1	1
Child Traction Splint	1	1
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	
15 inches x 3 inches	4	
4.5 foot x 3 inches	3	
K.E.D.	2	
Long Back Board w straps 3 sets	2	
Head Blocks + Straps sets	2	
<b>Cervical Collars: Adult Adjustable</b>		
Adult No-Neck	2	
Adult Short	2	
Adult Regular	2	
Adult Tall	2	
Child No-Neck	2	
Pedi (regular size)	2	
Stair Chair with straps	1	
Infant Back Board	1	
Auxiliary Stretcher (Scoop)	1	
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

FIRST AID KIT CONTAINING:	Required	On Hand	
		Main	Spare
Wrapped Oral Airways (1 each: Infant/child/adult)	2		
4" x 4" Dressings	3		
5" x 9" Dressings	12		
10" x 30" Trauma Dressings	4		
Roller Bandage - 2" Kling	2		
Roller Bandage - 4" Kling	6		
Triangular Bandages	6		
Tourniquets	2		
Trauma Scissors	1		
2" adhesive tape 5 yards min	1		
Adult B.P. Cuff	6		
Seat belt Cutter	1		
Non-Rebreather: Adult/Child	1 each		
Wrapped tongue depressors	2		
Stethoscope	1		
Penlight	1		
500cc Sterile water or saline	1		
Ice Packs	2		
Glucose Tube	1		
Band Aids	6		
"Mouth to Mouth" Mask	1		
Face Mask/Eye Shields	2		
Pair of exam Gloves	2		
DEFIBRILLATOR			
Batteries Charged and Unit Operational	yes		
Sets of Defibrillator Pads	2		
Spare Batteries	1		
Razor	1		
CPR Board (short board)	1		

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	1	✓
Aluminum Foil Roll	3	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

	Required	On Hand
Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	
Hacksaw with 6 wire carbide blades	1	
Pair of pliers, 10" vice grip	1	
Short handled sledge hammer, min 3 Lbs	1	
Rope, synthetic, min 50 ft by 1/2" diameter	1	
Pair of gloves (leather gauntlets)	2	
Pair of goggles (clear eye protective)	2	

	Required	On Hand
Latex-Free Equipment		✓
Latex-free examination gloves, two pairs ea. small, medium & Large	1	
Latex-free tourniquet	1	
Latex-free adult BVM and masks	1	
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	
Latex-free B/P cuff	1	
Latex-free stethoscope	1	

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventories by:

# AMBULANCE CHECKLIST

Date:

transfer sheet, min 6 handles 1 / CPR seat

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) under CPR seat	Complete set	1
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure, minimum	800 psi	
Flow Meter	2 3	2
O2 Humidifier (single use)	2 3	2
Oximeter (oxygen % and pulse)	1	1
Sterile Water for Humidifier (within expir. date)	1 4	1
Adult Non-Rebreathers w/tubing	6 4	2
Adult Simple Face masks w/tubing <del>with 1800</del>	<del>6 4</del>	<del>2</del>
Adult Nasal Cannulas	4 3	5
Child Non-Rebreathers w/tubing	4 3	2
Child Nasal Cannulas	4 3	6
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	minimum	800 psi
Demand Valve Assembly-mounted on primary	1	1
Adult, Child, Infant Face Mask for Resuscitators	1 each	
Adult Non-Rebreathers w/tubing	1	1
Adult Simple Face masks w/tubing	1	1
Adult Nasal Cannulas	1	1
O2 Cylinder Wrench	1	1
Full Spare O2 Cylinder (kept in vehicle)	1	1
<b>ON BOARD SUCTION</b>		
Operational	yes	yes
Transparent Collection Bottle	1	1
Wide Bore Tubing w/Pharyngeal Suction Tip	1	1
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	yes
Transparent Collection Bottle	1	1
Wide Bore Tubing w/Pharyngeal Suction Tip	1	1
Pair Exam Gloves	1	1
Face Mask / Eye Shield	1	1
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	2
Pedi Epi-Pens (within expiration date)	2	2

as Bays  
 with 2 2  
 with 2 2  
 with

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	1
Child Traction Splint	1	1
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	2
15 inches x 3 inches	4	4
4.5 foot x 3 inches	3	2
Short Back Board with three straps + head strap	1	1
K.E.D. - always in service	1	1
Long Back Board belts + straps + blocks	2	2
Long Board Kit (4) 9' belts, (4) head strap, (4) chin strap, (2) head blocks	2	2
Cervical Collars: Adult No-Neck	3	3
Adult Short	3	3
Adult Regular	3	3
Adult Tail	3	3
Child No-Neck	3	3
Pedi (regular size)	3	3
Stair Chair with straps	1	1
Infant Back Board	1	1
Auxiliary Stretcher (Scoop)	1	1
Wrapped Oral Airways (set of 7 sizes)	1	1
Wrapped Nasal Airways (several sizes)	1	1
4" x 4" Dressings	24	24
5" x 9" Dressings	12	12
10" x 30" Trauma Dressings	6	6
Roller Bandage - 2" Kling	12	12
Roller Bandage - 3" Kling	12	12
Roller Bandage - 4" Kling	12	12
Roller Bandage - 6" Kling	12	12
Triangular Bandages	12	12
Eye Pads	6	6
1" Tape	2	2
2" Tape	2	2
Bandage Shears	1	1
Burn Sheets	2	2

package lubricant for nasal airway

12



1. Sterile water  
Glucose

	Required	On Hand
OB Kit	1	1
Glucose	3	3
OB Pads	6	6
Seizer Sticks	6	6
Eye Wash (bottles)	2	2
Poison Antidote Kit w/Ipecac & Charcoal	1	1
Sterile H2O or Saline	2	1
Aluminum Foil Roll	1	1
Polyethylene Film Roll	1	1
Bed pan	1	1
Motion Sickness Bags	2	2
Pillows (waterproof)	2	2
Sheets	8	8
Blankets	4	4
Towels	4	4
Tissue Packages	2	2
Drinking Cups	2	2
Ice Packs	4	4
Hot Packs	4	4
Infection Control Kit	1	1
Sand Bags	2	2
Ring Cutter	1	1
Child B.P. Cuff	1	1
Adult B.P. Cuff	1	1
Thigh B.P. Cuff	1	1
Plastic Bags with Ties	2	2
Red Bio-Hazard Bags with Ties	2	2
Sharps Container (covered and secured)	1	1
Face Mask/Eye Shields	2	4
Pairs Exam Gloves (various sizes)	6	6
Hand Cleaner (dispensed) & unduly wrapped	1	2

	Required	On Hand	Spare
<b>FIRST AID KIT CONTAINING:</b>			
Wrapped Oral Airways (1 each: infant/child/adult)	3	3	3
4" x 4" Dressings	24	25	24
5" x 9" Dressings	4	6	6
10" x 30" Trauma Dressings	2	2	2
Roller Bandage - 3" Kling	6	5	8
Roller Bandage - 4" Kling	6	7	6
Triangular Bandages	6	6	6
Tourniquets	2	2	2
Trauma Scissors	1	1	1
Adult B.P. Cuff	1	1	1
Eye pads, 2" adhesive roll of tape	1	3	1
Seat belt cutter wrapped 3.5 inch syringe	1	1	1
Non-Rebreather, Adult/Child	1 each		
Ring Cutter	1		
Stethoscope	1	1	1
Penlight	1	1	
500cc Sterile water or saline within exp. date	1	1	1
Ice Packs	2	2	2
Glucose Tube w/in expiration date	1	1	1
Band Aids	25	25	25
"Mouth to Mouth" Mask	1	1	1
Face Mask/Eye Shields	2	2	2
Pair of exam Gloves	2	2	2
<b>DEFIBRILLATOR</b>			
Batteries Charged and Unit Operational	yes		
Sets of Defibrillator Pads	2		
Cassette Tape	1		
Monitor Leads	1		
Bag of Electrodes	1		
Razor	1		

03/06



## AMBULANCE CHECKLIST

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Stephen SEARAC*

Date: *2/22/01*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter*	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	4	✓
4.5 foot x 3 inches	3	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

39155.119

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	1	✓
Aluminum Foil Roll	3	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea.	1	✓
small, medium & Large		
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	2	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

—need RAZOR

# AMBULANCE CHECKLIST

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *B. Snyder / K. Redding*

Date: *3/16/01*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) set	1	1
ON BOARD O2 SUPPLIES		
O2 Cylinder Pressure	800 psi	
Flow Meter	2	2
O2 Humidifier (single use)	1	2
Oximeter (oxygen % and pulse)	1	1
Sterile Water for Humidifier	4	4
Adult Non-Rebreathers w/tubing	4	6
Adult Simple Face masks w/tubing	4	4
Adult Nasal Cannulas	4	7
Child Non-Rebreathers w/tubing	4	4
Child Nasal Cannulas	4	7
PORTABLE O2 SUPPLIES		
Primary O2 Cylinder Pressure	800 psi	1400
Regulator / flow meter	1	1
Adult, Child, Infant Face Mask for Resuscitators	2 each	6
Adult Non-Rebreathers w/tubing	2	2
Adult Simple Face masks w/tubing	2	2
Adult Nasal Cannulas	1	7
bag/valve/mask	1	1
Full Spare O2 Cylinder (kept in vehicle)	1	2
ON BOARD SUCTION		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	2
Pharyngeal Suction Tip	2	2
PORTABLE SUCTION UNIT		
Operational	yes	✓
Transparent Collection Bottle	1	1
Wide Bore Tubing w/Pharyngeal Suction Tip	1	1
Pair Exam Gloves	1	1
Face Mask / Eye Shield	1	1
EPINEPHRINE AUTO INJECTORS		
Adult Epi-Pens (within expiration date)	2	2
Pedi Epi-Pens (within expiration date)	2	2

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	1
Child Traction Splint	1	1
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	4	✓
4.5 foot x 3 inches	3	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20, 22, 24, 26	8	8
28, 30, 32, and 34		
Pediatric nasal airways 1 each 12, 14, 16, 18	4	3
water soluble lubricant	12	12
Bag Valve Mask Adult w O2 connector tube	1	1
Bag Valve Mask child & infant w O2 connector tube	1	1
Small Dressing min 4X4	24	24
Medium Dressing min 5X9	12	2
Large Dressing min 10"X30"	6	7
Roller Bandage - 4" Kling	12	12
Roller Bandage - 6" Kling	12	12
Triangular Bandages	12	12
1" Tape	3	3
1" Tape Hypoallergenic	1	1
Bandage Shears	1	1
Burn Sheets	2	2

*2410 1414*  
*2410 1414*  
*2410 1414*



*3 no tongue depressors*

OB Kit	1	2
Glucose- wrapped tongue depressors	3	
OB Pads	6	
Seizer Sticks	6	5
Poison Antidote Kit w/ Charcoal & measuring	2	1
Sterile H <sub>2</sub> O or Saline (3) liters	1	1
Aluminum Foil Roll	3	1
Polyethylene Film Roll	1	1
Bed pan	1	1
Motion Sickness Bags	1	1
Pillows (waterproof)	2	2+
Pillows cases	4	4
Sheets	8	8+
Blankets	4	4+
Towels	4	4
Tissue Packages	2	2
Drinking Cups	2	2
Ice Packs	4	4
Hot Packs	4	4
Infection Control Kit	2	2+
Ring Cutter	1	1
Infant B.P. Cuff	1	1
Child B.P. Cuff	1	1
Adult B.P. Cuff	1	1
Thigh B.P. Cuff	1	1
Plastic Bags with Ties	2	2
Red Bio-Hazard Bags with Ties	2	2+
Sharps Container (covered and secured)	1	1
Face Mask/Eye Shields	2	2+
Pairs Exam Gloves (various sizes)	6	6+
Hand Cleaner (dispensed)	1	1

Latex-Free Equipment	
Latex-free examination gloves, two pairs ea. small, medium & Large	1 ✓
Latex-free tourniquet	1 ✓
Latex-free adult BVM and masks	1 ✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2 ✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2 ✓
Latex-free B/P cuff	1 ✓
Latex-free stethoscope	1 ✓

*out of glucose*

FIRST AID KIT CONTAINING:			
Wrapped Oral Airways (1 each: infant/child/adult)			
4" x 4" Dressings	3		
5" x 9" Dressings	12		
10" x 30" Trauma Dressings	4		
Roller Bandage - 2" Kling	2		
Roller Bandage - 4" Kling	6		
Triangular Bandages	6		
Tourniquets	2		
Trauma Scissors	1		
2" adhesive tape 5 yards min	1		
Adult B.P. Cuff	6		
Seat belt Cutter	1		
Non-Rebreather: Adult/Child	1 each		
Wrapped tongue depressors	2		
Stethoscope	1		
Penlight	1		
500cc Sterile water or saline	1		
Ice Packs	2		
Glucose Tube	1		
Band Aids	6		
"Mouth to Mouth" Mask	1		
Face Mask/Eye Shields	2		
Pair of exam Gloves	2		
DEFIBRILLATOR			
Batteries Charged and Unit Operational	yes		
Sets of Defibrillator Pads	2		
Spare Batteries	1		
Razor	1		
CPR Board (short board)	1		

*1/2*

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by:

Nicholas Kakalecz

# AMBULANCE CHECKLIST

Date:

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) set	1	1
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	1400 psi
Flow Meter	2	2
O2 Humidifier (single use)	1	2
Oximeter (oxygen % and pulse)	1	1
Sterile Water for Humidifier	4	4
Adult Non-Rebreathers w/tubing	4	5
Adult Simple Face masks w/tubing	4	15
Adult Nasal Cannulas	4	5
Child Non-Rebreathers w/tubing	4	4
Child Nasal Cannulas	4	10
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	1400 psi
Regulator / flow meter	1	1
Adult, Child, Infant Face Mask for Resuscitators	2 each	2
Adult Non-Rebreathers w/tubing	2	2
Adult Simple Face masks w/tubing	2	2
Adult Nasal Cannulas	1	1
bag/valve/mask	1	1
Full Spare O2 Cylinder (kept in vehicle)	1	1
<b>ON BOARD SUCTION</b>		
Operational	yes	
French suction catheters 2 each 5, 8, 14,	6	
Transparent Collection Bottle	1	1
Suction Rinsing Water Bottle	1	1
Suction Tubing min 1/4inch in diameter min	2	2
Pharyngeal Suction Tip	2	2
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	
Transparent Collection Bottle	1	1
Wide Bore Tubing w/Pharyngeal Suction Tip	1	1
Pair Exam Gloves	1	1
Face Mask / Eye Shield	1	2
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	3
Pedi Epi-Pens (within expiration date)	2	1

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	1
Child Traction Splint	1	1
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	2
15 inches x 3 inches	2	2
4.5 foot x 3 inches	2	2
<b>K.E.D.</b>		
Long Back Board w straps 3 sets	2	2
Head Blocks + Straps sets	2	2
Cervical Collars: Adult Adjustable	2	2
Adult No-Neck	2	2
Adult Short	2	2
Adult Regular	2	2
Adult Tail	2	2
Child No-Neck	2	2
Pedi (regular size)	2	2
Stair Chair with straps	1	1
Infant Back Board	1	1
Auxiliary Stretcher (Scoop)	1	1
Wrapped Oral Airways (set of 7 sizes)	6	6
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	8
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	4
water soluble lubricant	12	12
Bag Valve Mask Adult w O2 connector tube	1	2
Bag Valve Mask child & infant w O2 connector tube	1	2
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	24
Large Dressing min 10"X30"	12	12
Roller Bandage - 4" Kling	6	6
Roller Bandage - 6" Kling	12	12
Triangular Bandages	12	12
1" Tape	3	3
1" Tape Hypoallergenic	1	1
Bandage Sheers	1	1
Burn Sheets	2	2

Expires June 01

*need*

	Required	On Hand
OB Kit	1	1
Glucose+ wrapped tongue depressors	3	3
OB Pads <i>none on hand</i>	6	0
Seizer Sticks	6	4
Poison Antidote Kit w/ Charcoal & measuring	2	1
Sterile H2O or Saline (3) liters	1	1
Aluminum Foil Roll	1	1
Polyethylene Film Roll	1	1
Bed pan	1	0
Motion Sickness Bags	1	4
Pillows (waterproof)	2	2
Pillows cases	4	4
Sheets	8	8
Blankets	4	4
Towels	4	4
Tissue Packages	2	3
Drinking Cups	2	2
Ice Packs	4	4
Hot Packs	4	4
Infection Control Kit	2	2
Ring Cutter	1	1
Infant B.P. Cuff	1	1
Child B.P. Cuff	1	1
Adult B.P. Cuff	1	1
Thigh B.P. Cuff	1	1
Plastic Bags with Ties <i>need ties</i>	2	2
Red Bio-Hazard Bags with Ties <i>need ties</i>	2	4
Sharps Container (covered and secured)	1	1
Face Mask/Eye Shields	2	2
Pairs Exam Gloves (various sizes)	6	6
Hand Cleaner (dispensed)	1	1

*need*

	Required	On Hand
<b>FIRST AID KIT CONTAINING:</b>		
Wrapped Oral Airways (1 each: infant/child/adult)	2	
4" x 4" Dressings	3	
5" x 9" Dressings	12	
10" x 30" Trauma Dressings	4	
Roller Bandage - 2" Kling	2	
Roller Bandage - 4" Kling	6	
Triangular Bandages	6	
Tourniquets	2	
Trauma Scissors	1	
2" adhesive tape 5 yards min	1	
Adult B.P. Cuff	6	
Seat belt Cutter	1	
Non-Rebreather: Adult/Child	1 each	
Wrapped tongue depressors	2	
Stethoscope	1	
Penlight	1	
500cc Sterile water or saline	1	
Ice Packs	2	
Glucose Tube	1	
Band Aids	6	
"Mouth to Mouth" Mask	1	
Face Mask/Eye Shields	2	
Pair of exam Gloves	2	
<b>DEFIBRILLATOR</b>		
Batteries Charged and Unit Operational	yes	
Sets of Defibrillator Pads	2	
Spare Batteries	1	
Razor	1	
CPR Board (short board)	1	

Latex-Free Equipment	
Latex-free examination gloves, two pairs ea. small, medium & Large	1
Latex-free tourniquet	1
Latex-free adult BVM and masks	1
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2
Latex-free nasal cannulae and delivery tubes, two each adult and child	2
Latex-free B/P cuff	1
Latex-free stethoscope	1

Equipment to Gain Access	
Screwdriver, min 8" regular blade	1
Hacksaw with 6 wire carbide blades	1
Pair of pliers, 10" vice grip	1
Short handled sledge hammer, min 3 Lbs	1
Rope, synthetic, min 50 ft by 1/2" diameter	1
Pair of gloves (leather gauntlets)	2
Pair of goggles (clear eye protective)	2

*need spare btr.*



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: Jeff Beckwith

# AMBULANCE CHECKLIST

Date: 3-17-02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) set	1	1
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	1400
Flow Meter	2	2
O2 Humidifier (single use)	1	2
Oximeter (oxygen % and pulse)	1	2
Sterile Water for Humidifier	4	4
Adult Non-Rebreathers w/tubing	4	4
Adult Simple Face masks w/tubing	4	4
Adult Nasal Cannulas	4	10
Child Non-Rebreathers w/tubing	4	4
Child Nasal Cannulas	4	10
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	1500
Regulator / flow meter	1	2
Adult, Child, Infant Face Mask for Resuscitators	2 each	4
Adult Non-Rebreathers w/tubing	2	2
Adult Simple Face masks w/tubing	2	2
Adult Nasal Cannulas	2	2
bag/valve/mask	1	2
Full Spare O2 Cylinder (kept in vehicle)	1	2
<b>ON BOARD SUCTION</b>		
Operational	yes	yes
French suction catheters 2 each 5, 8, 14,	6	6
Transparent Collection Bottle	1	1
Suction Rinsing Water Bottle	1	1
Suction Tubing min 1/4inch in diameter min	2	2
Pharyngeal Suction Tip	2	2
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	yes
Transparent Collection Bottle	1	1
Wide Bore Tubing w/Pharyngeal Suction Tip	1	1
Pair Exam Gloves	1	1
Face Mask / Eye Shield	1	2
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	2
Pedi Epi-Pens (within expiration date)	2	2

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	1
Child Traction Splint	1	1
Padded Board Splints		
3 foot x 3 inches	2	2
15 inches x 3 inches	4	4
4.5 foot x 3 inches	3	3
K.E.D.	2	2
Long Back Board w straps 3 sets	2	2
Head Blocks + Straps sets	2	2
Cervical Collars: Adult Adjustable	2	2
Adult No-Neck	2	2
Adult Short	2	2
Adult Regular	2	2
Adult Tail	2	2
Child No-Neck	2	2
Pedi (regular size)	2	2
Stair Chair with straps	1	1
Infant Back Board	1	1
Auxiliary Stretcher (Scoop)	1	1
Wrapped Oral Airways (set of 7 sizes)	6	6
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	8
28f, 30f, 32f and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	4
water soluble lubricant	12	12
Bag Valve Mask Adult w O2 connector tube	1	1
Bag Valve Mask child & infant w O2 connector tube	1	1
Small Dressing min 4X4	24	24
Medium Dressing min 5X9	12	12
Large Dressing min 10"X30"	6	6
Roller Bandage - 4" Kling	12	12
Roller Bandage - 6" Kling	12	12
Triangular Bandages	12	3
1" Tape	3	10
1" Tape Hypoallergenic	1	1
Bandage Shears	1	1
Burn Sheets	2	2

FIRST AID KIT CONTAINING:	Required	On Hand	
		Main	Spare
OB Kit	1		1
Glucose+ wrapped tongue depressors	3		
OB Pads	6		
Saizer Sticks	6		
Poison Antidote Kit w/ Charcoal&measuring	2		
Sterile H2O or Saline (3) liters	1		
Aluminum Foil Roll	3		
Polyethylene Film Roll	1		
Bed pan	1		
Motion Sickness Bags	1		
Pillows (waterproof)	2		
Pillows cases	4		
Sheets	8		
Blankets	4		
Towels	4		
Tissue Packages	2		
Drinking Cups	2		
Ice Packs	4		
Hot Packs	4		
Infection Control Kit	2		
Ring Cutter	1		
Infant B.P. Cuff	1		
Child B.P. Cuff	1		
Adult B.P. Cuff	1		
Thigh B.P. Cuff	1		
Plastic Bags with Ties	2		
Red Bio-Hazard Bags with Ties	2		
Sharps Container (covered and secured)	1		
Face Mask/Eye Shields	2		
Pairs Exam Gloves (various sizes)	6		
Hand Cleaner (dispensed)	1		

FIRST AID KIT CONTAINING:	Required	On Hand	
		Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)	2		
4" x 4" Dressings	3		
5" x 8" Dressings	12		
10" x 30" Trauma Dressings	4		
Roller Bandage - 2" Kling	2		
Roller Bandage - 4" Kling	6		
Triangular Bandages	6		
Tourniquets	2		
Trauma Scissors	1		
2" adhesive tape 5 yards min	1		
Adult B.P. Cuff	6		
Seat belt Cutter	1		
Non-Rebreather: Adult/Child	1 each		
Wrapped tongue depressors	2		
Stethoscope	1		
Penlight	1		
500cc Sterile water or saline	1		
Ice Packs	2		
Glucose Tube	1		
Band Aids	6		
"Mouth to Mouth" Mask	1		
Face Mask/Eye Shields	2		
Pair of exam Gloves	2		
DEFIBRILLATOR			
Batteries Charged and Unit Operational	yes		
Sets of Defibrillator Pads	2		
Spare Batteries	1		
Razor	1		
CPR Board (short board)	1		

FIRST AID KIT CONTAINING:	Required	On Hand	
		Main	Spare
Equipment to Gain Access			
Screwdriver, min 8" regular blade	1		
Heck saw with 6 wire carbide blades	1		
Pair of pliers, 10" vice grip	1		
Short handled sledge hammer, min 3 Lbs	1		
Rope, synthetic, min 50 ft by 1/2" diameter	1		
Pair of gloves (leather gauntlets)	2		
Pair of goggles (clear eye protective)	2		

FIRST AID KIT CONTAINING:	Required	On Hand	
		Main	Spare
Latex-Free Equipment			
Latex-free examination gloves, two pairs ea. small, medium & Large	1		4
Latex-free tourniquet	1		
Latex-free adult BVM and masks	1		
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2		
Latex-free nasal cannulae and delivery tubes, two each adult and child	2		
Latex-free B/P cuff	1		
Latex-free stethoscope	1		



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Ray*

# AMBULANCE CHECKLIST

Date: 8-5-02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) set	1	1
ON BOARD O2 SUPPLIES		
O2 Cylinder Pressure	≥ 800 psi	3100
Flow Meter	2	2
O2 Humidifier (single use)	1	1
Oximeter (oxygen % and pulse)	1	1
Sterile Water for Humidifier	4	4
Adult Non-Rebreathers w/tubing	4	4
Adult Simple Face masks w/tubing	4	4
Adult Nasal Cannulas	4	4
Child Non-Rebreathers w/tubing	4	4
Child Nasal Cannulas	4	4
PORTABLE O2 SUPPLIES		
Primary O2 Cylinder Pressure	800 psi	1200
Regulator / flow meter	1	1
Adult, Child, Infant Face Mask for Resuscitators	2 each	2
Adult Non-Rebreathers w/tubing	2	2
Adult Simple Face masks w/tubing	2	2
Adult Nasal Cannulas	2	2
bag/valve/mask	1	1
Full Spare O2 Cylinder (kept in vehicle)	1	3
ON BOARD SUCTION		
Operational	yes	2
French suction catheters 2 each 5, 8, 14, 18, 22, 24, 26, 28, 30, 32, 34, 36, 38, 40, 42, 44, 46, 48, 50, 52, 54, 56, 58, 60, 62, 64, 66, 68, 70, 72, 74, 76, 78, 80, 82, 84, 86, 88, 90, 92, 94, 96, 98, 100	6	6
Transparent Collection Bottle	1	1
Suction Rinsing Water Bottle	1	1
Suction Tubing min 1/4 inch in diameter min	2	2
Pharyngeal Suction Tip	2	2
PORTABLE SUCTION UNIT		
Operational	yes	2
Transparent Collection Bottle	1	1
Wide Bore Tubing w/Pharyngeal Suction Tip	1	1
Pair Exam Gloves	1	1
Face Mask / Eye Shield	1	1
EPINEPHRINE AUTO INJECTORS		
Adult Epi-Pens (within expiration date)	2	2
Pedi Epi-Pens (within expiration date)	2	2

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	1
Child Traction Splint	1	1
Padded Board Splints		
3 foot x 3 inches	2	2
15 inches x 3 inches	4	4
4.5 foot x 3 inches	3	3
K.E.D.	2	2
Long Back Board w straps 3 sets	2	2
Head Blocks + Straps sets	2	2
Cervical Collars: Adult Adjustable	2	2
Adult No-Neck	2	2
Adult Short	2	2
Adult Regular	2	2
Adult Tall	2	2
Child No-Neck	2	2
Pedi (regular size)	2	2
Stair Chair with straps	1	1
Infant Back Board	1	1
Auxiliary Stretcher (Scoop)	1	1
Wrapped Oral Airways (set of 7 sizes)	6	6
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	8
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	4
water soluble lubricant	12	12
Bag Valve Mask Adult w O2 connector tube	1	1
Bag Valve Mask child & infant w O2 connector tube	1	1
Small Dressing min 4X4	24	24
Medium Dressing min 5X9	12	12
Large Dressing min 10"X30"	6	6
Roller Bandage - 4" Kling	12	12
Roller Bandage - 6" Kling	12	12
Triangular Bandages	12	12
1" Tape	3	3
1" Tape Hypoallergenic	1	1
Bandage Shears	1	1
Burn Sheets	2	2

6.543 of 7  
212

12f

PAPER TAPE?

8-5-02 p 2 of 2

← 6 pgs?  
← ?

FIRST AID KIT CONTAINING:		2	Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		3	✓	
4" x 4" Dressings		12	✓	
5" x 9" Dressings		4	✓	
10" x 30" Trauma Dressings		2	✓	
Roller Bandage - 2" Kling		6	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		2	✓	
Trauma Scissors		1	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		1	✓	
Seat belt Cutter		1	✓	
Non-Rebreather: Adult/Child		1 each	✓	
Wrapped tongue depressors		2	✓	
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucose Tube		3	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes		✓	
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Razor		1	✓	
CPR Board (short board)		1	✓	

OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal&measuring	2	✓
Sterile H2O or Saline (3) liters	1	✓
Aluminum Foil Roll	3	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	2	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

## AMBULANCE CHECKLIST

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Amfcl*

Date:

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	1
Wrist and Ankle Restraints (for cot) set	1	1
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure <i>2200</i>	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure <i>2000 psi</i>	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas <del>2</del>	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	4	✓
4.5 foot x 3 inches	3	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	8	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

8-11-02  
 P/42

NOT IN  
 BAG

*Wanna*

7.1.1.1.1.1.1

25.1.1.1.1.1



8-11-02  
p 2 of 2

OB Kit

Glucose+ wrapped tongue depressors	1
OB Pads	3
Seizer Sticks	6
Poison Antidote Kit w/ Charcoal & measuring	2
Sterile H2O or Saline (3) liters	1
Aluminum Foil Roll	3
Polyethylene Film Roll	1
Bed pan	1
Motion Sickness Bags	1
Pillows (waterproof)	2
Pillows cases	4
Sheets	8
Blankets	4
Towels	4
Tissue Packages	2
Drinking Cups	2
Ice Packs	4
Hot Packs	4
Infection Control Kit	2
Ring Cutter	1
Infant B.P. Cuff	1
Child B.P. Cuff	1
Adult B.P. Cuff	1
Thigh B.P. Cuff	1
Plastic Bags with Ties	2
Red Bio-Hazard Bags with Ties	2
Sharps Container (covered and secured)	1
Face Mask/Eye Shields	2
Pairs Exam Gloves (various sizes)	6
Hand Cleaner (dispensed)	1

FIRST AID KIT CONTAINING:

Wrapped Oral Airways (1 each: infant/child/adult)	2	Main	Spare
4" x 4" Dressings	12		
5" x 9" Dressings	4		
10" x 30" Trauma Dressings	2		
Roller Bandage - 2" Kling	6		
Roller Bandage - 4" Kling	6		
Triangular Bandages	6		
Tourniquets	2		
Trauma Scissors	1		
2" adhesive tape 5 yards min	1		
Adult B.P. Cuff	6		
Seat belt Cutter	1		
Non-Rebreather: Adult/Child	1 each		
Wrapped tongue depressors	2		
Stethoscope	1		
Penlight	1		
500cc Sterile water or saline	1		
Ice Packs	2		
Glucose Tube	1		
Band Aids	6		
"Mouth to Mouth" Mask	1		
Face Mask/Eye Shields	2		
Pair of exam Gloves	2		
DEFIBRILLATOR			
Batteries Charged and Unit Operational	yes		
Sets of Defibrillator Pads	2		
Spare Batteries	1		
Razor	1		
CPR Board (short board)	1		

Latex-Free Equipment

Latex-free examination gloves, two pairs ea.	1
small, medium & Large	
Latex-free tourniquet	1
Latex-free adult BVM and masks	1
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2
Latex-free nasal cannulae and delivery tubes, two each adult and child	2
Latex-free B/P cuff	1
Latex-free stethoscope	1

Equipment to Gain Access

Screwdriver, min 8" regular blade	1
Hacksaw with 6 wire carbide blades	1
Pair of pliers, 10" vice grip	1
Short handled sledge hammer, min 3 Lbs	1
Rope, synthetic, min 50 ft by 1/2" diameter	1
Pair of gloves (leather gauntlets)	2
Pair of goggles (clear eye protective)	2

EXTRA PAIDS  
EXTRA PAIDS  
EXTRA PAIDS

Gloves, missing



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Lafayette*

# AMBULANCE CHECKLIST

Date: *THURSDAY*  
*AUG 29, 2002*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	4	✓
4.5 foot x 3 inches	3	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
<b>Cervical Collars: Adult Adjustable</b>		
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	2 sets	6
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic <i>2 packs taken?</i>	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*port 2*

8-27-06  
p 2 of 2

	Required	On Hand
OB Kit	1	✓
Glucose- wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	1	✓
Aluminum Foil Roll	3	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Throat Swabs (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	12	✓
5" x 9" Dressings	4	✓
10" x 30" Trauma Dressings	2	✓
Roller Bandage - 2" Kling	6	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

3 Goggles, missing



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Lnjdl*

# AMBULANCE CHECKLIST

Date: *9-4-02*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	1	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*Lnjdl*  
*10/1/02*  
*10/1/02*  
*7/11/05*  
*1/16/04*

2.2012  
9-4-02

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

	Required	On Hand
<b>FIRST AID KIT CONTAINING:</b>	2	Main
Wrapped Oral Airways (1 each: infant/child/adult)	3	✓
4" x 4" Dressings	12	✓
5" x 9" Dressings	4	✓
10" x 30" Trauma Dressings	2	✓
Roller Bandage - 2" Kling	6	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	1	✓
Seat belt Cutter	1 each	✓
Non-Rebreather: Adult/Child	2	✓
Wrapped tongue depressors	1	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
<b>DEFIBRILLATOR</b>		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

	Required	On Hand
<b>Latex-Free Equipment</b>		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

	Required	On Hand
<b>Equipment to Gain Access</b>		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

1/2 pairs



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *L. M. J. d. L.*

# AMBULANCE CHECKLIST

Date: 9-10-02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
<b>K.E.D.</b>		
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

9-10-02 P. 2002

FIRST AID KIT CONTAINING:	Required	On Hand	
		Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓	✓
4" x 4" Dressings	3	✓	✓
5" x 9" Dressings	12	✓	✓
10" x 30" Trauma Dressings	4	✓	✓
Roller Bandage - 2" Kling	2	✓	✓
Roller Bandage - 4" Kling	6	✓	✓
Triangular Bandages	6	✓	✓
Tourniquets	2	✓	✓
Trauma Scissors	1	✓	✓
2" adhesive tape 5 yards min	1	✓	✓
Adult B.P. Cuff	6	✓	✓
Seat belt Cutter	1	✓	✓
Non-Rebreather: Adult/Child	1 each	✓	✓
Wrapped tongue depressors	2	✓	✓
Stethoscope	1	✓	✓
Penlight	1	✓	✓
500cc Sterile water or saline	1	✓	✓
Ice Packs	2	✓	✓
Glucose Tube	1	✓	✓
Band Aids	6	✓	✓
"Mouth to Mouth" Mask	1	✓	✓
Face Mask/Eye Shields	2	✓	✓
Pair of exam Gloves	2	✓	✓
DEFIBRILLATOR			
Batteries Charged and Unit Operational	yes	✓	✓
Sets of Defibrillator Pads	2	✓	✓
Spare Batteries	1	✓	✓
Razor	1	✓	✓
CPR Board (short board)	1	✓	✓

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan <i>ORAL CARE KIT</i>	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	1	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

1/2 masks  
Screwdriver

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Lafol + Josh Buxton*

# AMBULANCE CHECKLIST

Date: *9-16-02 Monday*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*1 9-16-02*



11-20-02  
9-16-02

FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓	
4" x 4" Dressings		12	✓	
5" x 9" Dressings		4	✓	
10" x 30" Trauma Dressings		2	✓	
Roller Bandage - 2" Kling		6	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		2	✓	
Trauma Scissors		1	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		6	✓	
Seat belt Cutter		1	✓	
Non-Rebreather: Adult/Child		1 each	✓	
Wrapped tongue depressors		2	✓	
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucose Tube		1	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes		✓	
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Razor		1	✓	
CPR Board (short board)		1	✓	

	Required	On Hand
OB Kit	1	✓
Glucose- wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *LaFal*

# AMBULANCE CHECKLIST

Date: *Sunday 9.22.02*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*p. 1 of 2*  
*9.22.02*

*0?*

FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓	
4" x 4" Dressings		3	✓	
5" x 9" Dressings		12	✓	
10" x 30" Trauma Dressings		4	✓	
Roller Bandage - 2" Kling		2	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		2	✓	
Trauma Scissors		1	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		6	✓	
Seat belt Cutter		1	✓	
Non-Rebreather: Adult/Child		1 each	✓	
Wrapped tongue depressors		2	✓	
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucose Tube		1	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes		✓	
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Razor		1	✓	
CPR Board (short board)		1	✓	

Required	On Hand
OB Kit	1 ✓
Glucose+ wrapped tongue depressors	3 ✓
OB Pads	6 ✓
Seizer Sticks	6 ✓
Poison Antidote Kit w/ Charcoal&measuring	2 ✓
Sterile H2O or Saline (3) liters	3 ✓
Aluminum Foil Roll	1 ✓
Polyethylene Film Roll	1 ✓
Bed pan	1 ✓
Motion Sickness Bags	1 ✓
Pillows (waterproof)	2 ✓
Pillows cases	4 ✓
Sheets	8 ✓
Blankets	4 ✓
Towels	4 ✓
Tissue Packages	2 ✓
Drinking Cups	2 ✓
Ice Packs	4 ✓
Hot Packs	4 ✓
Infection Control Kit	2 ✓
Ring Cutter	1 ✓
Infant B.P. Cuff	1 ✓
Child B.P. Cuff	1 ✓
Adult B.P. Cuff	1 ✓
Thigh B.P. Cuff	1 ✓
Plastic Bags with Ties	2 ✓
Red Bio-Hazard Bags with Ties	2 ✓
Sharps Container (covered and secured)	1 ✓
Face Mask/Eye Shields	2 ✓
Pairs Exam Gloves (various sizes)	6 ✓
Hand Cleaner (dispensed)	1 ✓

Equipment to Gain Access	Required	On Hand
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Latex-Free Equipment	Required	On Hand
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

	Required	On Hand
OB Kit	1	✓
Glucose- wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	✓	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓	
4" x 4" Dressings		3	✓	
5" x 9" Dressings		12	✓	
10" x 30" Trauma Dressings		4	✓	
Roller Bandage - 2" Kling		2	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		2	✓	
Trauma Scissors		1	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		6	✓	
Seat belt Cutter		1	✓	
Non-Rebreather: Adult/Child		1 each	✓	
Wrapped tongue depressors		2		
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucose Tube		1	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes		✓	
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Rezor		1	✓	
CPR Board (short board)		1	✓	

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

P. 201 L  
9.24.02



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Amf*

# AMBULANCE CHECKLIST

Date: *1/15 9.24.02*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
<b>K.E.D.</b>		
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape		✓
1" Tape Hypoallergenic	3	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

9-24.02



FIRST AID KIT CONTAINING:		Required		On Hand	
				Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2		✓	
4" x 4" Dressings		3		✓	
5" x 9" Dressings		12		✓	
10" x 30" Trauma Dressings		4		✓	
Roller Bandage - 2" Kling		2		✓	
Roller Bandage - 4" Kling		6		✓	
Triangular Bandages		6		✓	
Tourniquets		2		✓	
Trauma Scissors		1		✓	
2" adhesive tape 5 yards min		1		✓	
Adult B.P. Cuff		6		✓	
Seat belt Cutter		1 each		✓	
Non-Rebreather: Adult/Child				✓	
Wrapped tongue depressors		2		✓	
Stethoscope		1		✓	
Penlight		1		✓	
500cc Sterile water or saline		1		✓	
Ice Packs		2		✓	
Glucose Tube		1		✓	
Band Aids		6		✓	
"Mouth to Mouth" Mask		1		✓	
Face Mask/Eye Shields		2		✓	
Pair of exam Gloves		2		✓	
DEFIBRILLATOR					
Batteries Charged and Unit Operational	yes			✓	
Sets of Defibrillator Pads		2		✓	
Spare Batteries		1		✓	
Razor		1		✓	
CPR Board (short board)		1		✓	

Required	On Hand
OB Kit	1
Glucose+ wrapped tongue depressors	3
OB Pads	6
Seizer Sticks	6
Poison Antidote Kit w/ Charcoal&measuring	2
Sterile H2O or Saline (3) liters	3
Aluminum Foil Roll	1
Polyethylene Film Roll	1
Bed pan	1
Motion Sickness Bags	1
Pillows (waterproof)	2
Pillows cases	4
Sheets	8
Blankets	4
Towels	4
Tissue Packages	2
Drinking Cups	2
Ice Packs	4
Hot Packs	4
Infection Control Kit	2
Ring Cutter	1
Infant B.P. Cuff	1
Child B.P. Cuff	1
Adult B.P. Cuff	1
Thigh B.P. Cuff	1
Plastic Bags with Ties	2
Red Bio-Hazard Bags with Ties	2
Sharps Container (covered and secured)	1
Face Mask/Eye Shields	2
Pairs Exam Gloves (various sizes)	6
Hand Cleaner (dispensed)	1

Required	On Hand
Equipment to Gain Access	
Screwdriver, min 8" regular blade	1
Hacksaw with 6 wire carbide blades	1
Pair of pliers, 10" vice grip	1
Short handled sledge hammer, min 3 Lbs	1
Rope, synthetic, min 50 ft by 1/2" diameter	1
Pair of gloves (leather gauntlets)	2
Pair of goggles (clear eye protective)	2

Latex-Free Equipment	
Latex-free examination gloves, two pairs ea. small, medium & Large	1
Latex-free tourniquet	1
Latex-free adult BVM and masks	1
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2
Latex-free nasal cannulae and delivery tubes, two each adult and child	2
Latex-free B/P cuff	1
Latex-free stethoscope	1

366 OUES

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Layde*

# AMBULANCE CHECKLIST

Date: 9.26.02 [PAC. MASS. EMERGENCY  
 MEDICATION  
 POUCH]

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints	2	✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & Infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

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FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓	
4" x 4" Dressings		3	✓	
5" x 9" Dressings		12	✓	
10" x 30" Trauma Dressings		4	✓	
Roller Bandage - 2" Kling		2	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		2	✓	
Trauma Scissors		1	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		6	✓	
Seat belt Cutter		1	✓	
Non-Rebreather: Adult/Child		1 each	✓	
Wrapped tongue depressors		2	✓	
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucose Tube		1	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes		✓	
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Razor		1	✓	
CPR Board (short board)		1	✓	

Equipment to Gain Access		Required	On Hand	
			Main	Spare
Screwdriver, min 8" regular blade		1	✓	
Hacksaw with 6 wire carbide blades		1	✓	
Pair of pliers, 10" vice grip		1	✓	
Short handled sledge hammer, min 3 Lbs		1	✓	
Rope, synthetic, min 50 ft by 1/2" diameter		1	✓	
Pair of gloves (leather gauntlets)		2	✓	
Pair of goggles (clear eye protective)		2	✓	

OB Kit		Required	On Hand	
			Main	Spare
Glucose+ wrapped tongue depressors		1	✓	
OB Pads		3	✓	
Seizer Sticks		6	✓	
Poison Antidote Kit w/ Charcoal & measuring		2	✓	
Sterile H2O or Saline (3) liters		3	✓	
Aluminum Foil Roll		1	✓	
Polyethylene Film Roll		1	✓	
Bed pan	✓	1	✓	
Motion Sickness Bags		1	✓	
Pillows (waterproof)		2	✓	
Pillows cases		4	✓	
Sheets		8	✓	
Blankets		4	✓	
Towels		4	✓	
Tissue Packages		2	✓	
Drinking Cups		2	✓	
Ice Packs		4	✓	
Hot Packs		4	✓	
Infection Control Kit		2	✓	
Ring Cutter		1	✓	
Infant B.P. Cuff		1	✓	
Child B.P. Cuff		1	✓	
Adult B.P. Cuff		1	✓	
Thigh B.P. Cuff		1	✓	
Plastic Bags with Ties		2	✓	
Red Bio-Hazard Bags with Ties		2	✓	
Sharps Container (covered and secured)		1	✓	
Face Mask/Eye Shields		2	✓	
Pairs Exam Gloves (various sizes)		6	✓	
Hand Cleaner (dispensed)		1	✓	

Latex-Free Equipment		Required	On Hand	
			Main	Spare
Latex-free examination gloves, two pairs ea. small, medium & Large		1	✓	
Latex-free tourniquet		1	✓	
Latex-free adult BVM and masks		1	✓	
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child		2	✓	
Latex-free nasal cannulae and delivery tubes, two each adult and child		2	✓	
Latex-free B/P cuff		1	✓	
Latex-free stethoscope		1	✓	



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Langford*

# AMBULANCE CHECKLIST

Date: *9-28-02* *SATURDAY*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*p. 1 of 2*



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Empd*

# AMBULANCE CHECKLIST

Date: *10-5-02*

*Summary*

*1030K  
p. 1 of 2*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

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p. 2 of 2

FIRST AID KIT CONTAINING:		Required	On Hand
			Main Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓
4" x 4" Dressings		3	✓
5" x 9" Dressings		12	✓
10" x 30" Trauma Dressings		4	✓
Roller Bandage - 2" Kling		2	✓
Roller Bandage - 4" Kling		6	✓
Triangular Bandages		6	✓
Tourniquets		2	✓
Trauma Scissors		1	✓
2" adhesive tape 5 yards min		1	✓
Adult B.P. Cuff		6	✓
Seat belt Cutter		1	✓
Non-Rebreather: Adult/Child		1 each	✓
Wrapped tongue depressors		2	✓
Stethoscope		1	✓
Penlight		1	✓
500cc Sterile water or saline		1	✓
Ice Packs		2	✓
Glucose Tube		1	✓
Band Aids		6	✓
"Mouth to Mouth" Mask		1	✓
Face Mask/Eye Shields		2	✓
Pair of exam Gloves		2	✓
DEFIBRILLATOR			
Batteries Charged and Unit Operational	yes		✓
Sets of Defibrillator Pads		2	✓
Spare Batteries		1	✓
Razor		1	✓
CPR Board (short board)		1	✓

Required	On Hand
OB Kit	1 ✓
Glucose+ wrapped tongue depressors	3 ✓
OB Pads	6 ✓
Seizer Sticks	6 ✓
Poison Antidote Kit w/ Charcoal & measuring	2 ✓
Sterile H <sub>2</sub> O or Saline (3) liters	3 ✓
Aluminum Foil Roll	1 ✓
Polyethylene Film Roll	1 ✓
Bed pan	1 ✓
Motion Sickness Bags	1 ✓
Pillows (waterproof)	2 ✓
Pillows cases	4 ✓
Blankets	8 ✓
Towels	4 ✓
Tissue Packages	2 ✓
Drinking Cups	2 ✓
Ice Packs	4 ✓
Hot Packs	4 ✓
Infection Control Kit	2 ✓
Ring Cutter	1 ✓
Infant B.P. Cuff	1 ✓
Child B.P. Cuff	1 ✓
Adult B.P. Cuff	1 ✓
Thigh B.P. Cuff	1 ✓
Plastic Bags with Ties	2 ✓
Red Bio-Hazard Bags with Ties	2 ✓
Sharps Container (covered and secured)	1 ✓
Face Mask/Eye Shields	2 ✓
Pairs Exam Gloves (various sizes)	6 ✓
Hand Cleaner (dispensed)	1 ✓

Equipment to Gain Access	Required	On Hand
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Latex-Free Equipment	Required	On Hand
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

360045

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Empd*

# AMBULANCE CHECKLIST

Date: *10/10/02*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*p. 1 of 2*  
*10-10-02*



	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

10-10-02



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Emf*

# AMBULANCE CHECKLIST

Date: *10-16-02*

*W. H. H. S. O. A. Y.*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	8	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasul airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

p. 2 of 2

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather, Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucosa Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

36 units

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Engh* + *Alan Asan*  
*Don Bacon*  
*John Baccarini*

# AMBULANCE CHECKLIST

Date: 10-22-02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
ON BOARD O2 SUPPLIES		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
PORTABLE O2 SUPPLIES		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
ON BOARD SUCTION		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
PORTABLE SUCTION UNIT		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
EPINEPHRINE AUTO INJECTORS		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.		
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	8	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape		
1" Tape Hypoallergenic	3	✓
Bandage Shears	1	✓
Burn Sheets	1	✓
	2	✓

1 in. saw / 1 in. c.  
 p. 1 of 2



	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sicks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment	
Latex-free examination gloves, two pairs ea. small, medium & Large	1
Latex-free tourniquet	1
Latex-free adult BVM and masks	1
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2
Latex-free nasal cannulae and delivery tubes, two each adult and child	2
Latex-free B/P cuff	1
Latex-free stethoscope	1

	Required	On Hand
<b>FIRST AID KIT CONTAINING:</b>		
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
<b>DEFIBRILLATOR</b>		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access	
Screwdriver, min 8" regular blade	1
Hacksaw with 6 wire carbide blades	1
Pair of pliers, 10" vice grip	1
Short handled sledge hammer, min 3 Lbs	1
Rope, synthetic, min 50 ft by 1/2" diameter	1
Pair of gloves (leather gauntlets)	2
Pair of goggles (clear eye protective)	2

10-66-00  
p. 2 of 2

36 counts



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Engh*

# AMBULANCE CHECKLIST

Date: 10-18-02 *Murray*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

10-18-02  
*p. 1 of 2*

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea.	1	✓
small, medium & Large		
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	12	✓
5" x 9" Dressings	4	✓
10" x 30" Trauma Dressings	2	✓
Roller Bandage - 2" Kling	6	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

10.00  
p. 2 of 2

3 GADVE S

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Lafol*

# AMBULANCE CHECKLIST

Date: *11.3.02 Sunday*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	1	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

<b>ON BOARD E.M.S. SUPPLIES</b>		
Adult Traction Splint	Required	On Hand
Child Traction Splint	1	✓
Padded Board Splints	1	✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*p. 1 of 2*



	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather, Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		✓
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

3600005

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Caplan*

# AMBULANCE CHECKLIST

Date: 11-15-02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints	2	✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	8	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

NOT SIX SEVEN

*p. 2 of 2*

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

*360ms*



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *LaPal*

# AMBULANCE CHECKLIST

Date: 11/21/02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

1 NIVIL UNIT  
11-21-02  
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FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓	
4" x 4" Dressings		3	✓	
5" x 9" Dressings		12	✓	
10" x 30" Trauma Dressings		4	✓	
Roller Bandage - 2" Kling		2	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		6	✓	
Trauma Scissors		2	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		6	✓	
Seat belt Cutter		1	✓	
Non-Rebreather: Adult/Child		1 each	✓	
Wrapped tongue depressors		2	✓	
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucosa Tube		1	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR			✓	
Batteries Charged and Unit Operational	yes		✓	
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Razor		1	✓	
CPR Board (short board)		1	✓	

Equipment to Gain Access				
Screwdriver, min 8" regular blade		1	✓	
Hacksaw with 6 wire carbide blades		1	✓	
Pair of pliers, 10" vice grip		1	✓	
Short handled sledge hammer, min 3 Lbs		1	✓	
Rope, synthetic, min 50 ft by 1/2" diameter		1	✓	
Pair of gloves (leather gauntlets)		2	✓	
Pair of goggles (clear eye protective)		2	✓	

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Capal*

# AMBULANCE CHECKLIST

Date: 11-27-02

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

Wednesday  
11-27-02  
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FIRST AID KIT CONTAINING:		Required		On Hand	
				Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2		✓	
4" x 4" Dressings		3		✓	
5" x 9" Dressings		12		✓	
10" x 30" Trauma Dressings		4		✓	
Roller Bandage - 2" Kling		2		✓	
Roller Bandage - 4" Kling		6		✓	
Triangular Bandages		6		✓	
Tourniquets		2		✓	
Trauma Scissors		1		✓	
2" adhesive tape 5 yards min		1		✓	
Adult B.P. Cuff		6		✓	
Seat belt Cutter		1		✓	
Non-Rebreather: Adult/Child		1 each		✓	
Wrapped tongue depressors		2		✓	
Stethoscope		1		✓	
Penlight		1		✓	
500cc Sterile water or saline		1		✓	
Ice Packs		2		✓	
Glucose Tube		1		✓	
Band Aids		6		✓	
"Mouth to Mouth" Mask		1		✓	
Face Mask/Eye Shields		2		✓	
Pair of exam Gloves		2		✓	
DEFIBRILLATOR					
Batteries Charged and Unit Operational	yes			✓	
Sets of Defibrillator Pads		2		✓	
Spare Batteries		1		✓	
Razor		1		✓	
CPR Board (short board)		1		✓	

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

	Required	On Hand
Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

	Required	On Hand
Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Enjd*

# AMBULANCE CHECKLIST

Date: *12-3-02*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f, 28f, 30f, 32f, and 34f	8	✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & Infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

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FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2		
4" x 4" Dressings		3		
5" x 9" Dressings		12		
10" x 30" Trauma Dressings		4		
Roller Bandage - 2" Kling		2		
Roller Bandage - 4" Kling		6		
Triangular Bandages		6		
Tourniquets		6		
Trauma Scissors		2		
2" adhesive tape 5 yards min		1		
Adult B.P. Cuff		6		
Seat belt Cutter		1		
Non-Rebreather: Adult/Child		1 each		
Wrapped tongue depressors		2		
Stethoscope		1		
Penlight		1		
500cc Sterile water or saline		1		
Ice Packs		2		
Glucose Tube		1		
Band Aids		6		
"Mouth to Mouth" Mask		1		
Face Mask/Eye Shields		2		
Pair of exam Gloves		2		
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes			
Sets of Defibrillator Pads		2		
Spare Batteries		1		
Razor		1		
CPR Board (short board)		1		

Equipment to Gain Access				
Screwdriver, min 8" regular blade		1		
Hacksaw with 6 wire carbide blades		1		
Pair of pliers, 10" vice grip		1		
Short handled sledge hammer, min 3 Lbs		1		
Rope, synthetic, min 50 ft by 1/2" diameter		1		
Pair of gloves (leather gauntlets)		2		
Pair of goggles (clear eye protective)		2		

	Required	On Hand
OB Kit	1	
Glucose+ wrapped tongue depressors	3	
OB Pads	6	
Seizer Sticks	6	
Poison Antidote Kit w/ Charcoal&measuring	2	
Sterile H2O or Saline (3) liters	3	
Aluminum Foil Roll	1	
Polyethylene Film Roll	1	
Bed pan	1	
Motion Sickness Bags	1	
Pillows (waterproof)	2	
Pillows cases	4	
Sheets	8	
Blankets	4	
Towels	4	
Tissue Packages	2	
Drinking Cups	2	
Ice Packs	4	
Hot Packs	4	
Infection Control Kit	2	
Ring Cutter	1	
Infant B.P. Cuff	1	
Child B.P. Cuff	1	
Adult B.P. Cuff	1	
Thigh B.P. Cuff	1	
Plastic Bags with Ties	2	
Red Bio-Hazard Bags with Ties	2	
Sharps Container (covered and secured)	1	
Face Mask/Eye Shields	2	
Pairs Exam Gloves (various sizes)	6	
Hand Cleaner (dispensed)	1	

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	
Latex-free tourniquet	1	
Latex-free adult BVM and masks	1	
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	
Latex-free B/P cuff	1	
Latex-free stethoscope	1	



Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Amfd*

# AMBULANCE CHECKLIST

Date: *12-9-02*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
<b>K.E.D.</b>		
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tall	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
<b>Small Dressing min 4X4</b>		
Medium Dressing min 5X9	24	✓
Large Dressing min 10"X30"	12	✓
Roller Bandage - 4" Kling	6	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

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*12-9-02*

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	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	1	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	2	✓
Face Mask/Eye Shields	1	✓
Pairs Exam Gloves (various sizes)	2	✓
Hand Cleaner (dispensed)	6	✓
	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	6	✓
Trauma Scissors	2	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
	1	✓
CPR Board (short board)	1	✓

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Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Empd*

## AMBULANCE CHECKLIST

Date: *12-15-02 Sunday*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
<b>Padded Board Splints</b>		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
<b>Cervical Collars: Adult Adjustable</b>		
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*12-15-02*  
*12/15/02*



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FIRST AID KIT CONTAINING:		Required	On Hand	
			Main	Spare
Wrapped Oral Airways (1 each: infant/child/adult)		2	✓	
4" x 4" Dressings		3	✓	
5" x 9" Dressings		12	✓	
10" x 30" Trauma Dressings		4	✓	
Roller Bandage - 2" Kling		2	✓	
Roller Bandage - 4" Kling		6	✓	
Triangular Bandages		6	✓	
Tourniquets		2	✓	
Trauma Scissors		1	✓	
2" adhesive tape 5 yards min		1	✓	
Adult B.P. Cuff		6	✓	
Seat belt Cutter		1	✓	
Non-Rebreather, Adult/Child		1 each	✓	
Wrapped tongue depressors		2	✓	
Stethoscope		1	✓	
Penlight		1	✓	
500cc Sterile water or saline		1	✓	
Ice Packs		2	✓	
Glucose Tube		1	✓	
Band Aids		6	✓	
"Mouth to Mouth" Mask		1	✓	
Face Mask/Eye Shields		2	✓	
Pair of exam Gloves		2	✓	
DEFIBRILLATOR				
Batteries Charged and Unit Operational	yes			
Sets of Defibrillator Pads		2	✓	
Spare Batteries		1	✓	
Razor		1	✓	
CPR Board (short board)		1	✓	

Equipment to Gain Access				
Screwdriver, min 8" regular blade		1	✓	
Hacksaw with 6 wire carbide blades		1	✓	
Pair of pliers, 10" vice grip		1	✓	
Short handled sledge hammer, min 3 Lbs		1	✓	
Rope, synthetic, min 50 ft by 1/2" diameter		1	✓	
Pair of gloves (leather gauntlets)		2	✓	
Pair of goggles (clear eye protective)		2	✓	

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment			
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓	
Latex-free tourniquet	1	✓	
Latex-free adult BVM and masks	1	✓	
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓	
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓	
Latex-free B/P cuff	1	✓	
Latex-free stethoscope	1	✓	

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Amjad*

# AMBULANCE CHECKLIST

Date: *12-21-02 SATURDAY*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*12-21-02*  
*p. 1 of 2*

*p. 2 of 2*

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

	Required	On Hand
<b>FIRST AID KIT CONTAINING:</b>	2	✓
Wrapped Oral Airways (1 each: infant/child/adult)	3	✓
4" x 4" Dressings	12	✓
5" x 9" Dressings	4	✓
10" x 30" Trauma Dressings	2	✓
Roller Bandage - 2" Kling	6	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
<b>DEFIBRILLATOR</b>		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" v-grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

360045



Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Emfd*

# AMBULANCE CHECKLIST

Date: *1-8-03*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4 inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
<b>K.E.D.</b>		
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		✓
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

*1-8-03*  
*1-8-03*  
*p. 1 of 2*

1-8-05  
p. 2 of 2

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H <sub>2</sub> O or Saline (3) liters	3	✓
Aluminum Foil Roll	1	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

Latex-Free Equipment		
Latex-free examination gloves, two pairs ea. small, medium & Large	1	✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O <sub>2</sub> masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	6	✓
Trauma Scissors	2	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	1	✓
Seat belt Cutter	6	✓
Non-Rebreather, Adult/Child	1	✓
Wrapped tongue depressors	1 each	✓
Stethoscope	2	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	1	✓
Glucose Tube	2	✓
Band Aids	1	✓
"Mouth to Mouth" Mask	6	✓
Face Mask/Eye Shields	1	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR	2	✓
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 8 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

3600ES

# List of equipment we need

for A1:

2 microdrip sets, more macro's. (only have  
500 mL sterile H<sub>2</sub>O 3 left)

2" Kling.

10 #24 angiocaths  
10 #22 angiocaths  
6 #20 angiocaths  
10 #18 angiocaths  
3 #16 angiocaths  
0 #14 angiocaths

24 NC  
24 NRB adult  
12 2" Kling  
1 pair sm gloves to try

Missing 1 glove from tool box

Adult NRB

ankle hitch for pedi traction splint.

#12 pedi nasal airway.

500 mL bags Normal saline

Rear left bottom break light out.

Filled 4 portable O<sub>2</sub> tanks @ 1500 psi  
washed outside of truck + cleaned  
out front.



## AMBULANCE CHECK

Sherborn Fire Department  
 Sherborn, Massachusetts 01770

Inventoried by: *Don Coffman*

Date: *1/25/03*

	Required	On Hand
<b>STRETCHER</b>	1	✓
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	800 psi	1000
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	1	✓
Flow Meter	4	✓
O2 Humidifier (single use)	4	✓
O2 Humidifier (oxygen % and pulse)	4	✓
Oximeter Water for Humidifier	4	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Adult Nasal Cannulas w/tubing	4	✓
Child Non-Rebreathers w/tubing	800 psi	1
Child Nasal Cannulas	1	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	2 each	2
Primary flow meter	2	✓
Regulator / Infant Face Mask for Resuscitators	2	✓
Adult, Child, Infant Face Masking	1	✓
Adult Non-Rebreathers w/tubing	1	✓
Adult Simple Face masks w/tubing	1	✓
Adult Nasal Cannulas	1	✓
Adult Nasal Cannulas (kept in vehicle)	yes	6
bag/valve/mask	yes	1
Full Spare O2 Cylinder (each 5, 8, 14)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	2 each 5, 8, 14	2
French suction catheters	2	✓
French suction Collection Bottle	2	✓
Transparent Collection Bottle	2	✓
Transparent Rinsing Water Bottle	min 1/4 inch in diameter	min
Suction Tubing min 1/4 inch in diameter	yes	1
Suction Tubing min 1/4 inch in diameter	yes	1
<b>PHARYNGEAL SUCTION UNIT</b>		
Operational	1	✓
Operational Collection Bottle	1	✓
Transparent Tubing w/Pharyngeal Suction Tip	1	✓
Wide Bore Tubing	2	✓
Pair Exam Gloves	2	✓
Face Mask / Eye Shield	2	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)		
Pedi Epi-Pens (within expiration date)		

*face masks are out.*

*collect?*

	Required	On Hand
<b>ON BOARD E.M.S. SUPPLIES</b>		
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints	2	✓
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Head Blocks - Adult Adjustable	2	✓
Cervical Collars: Adult No-Neck	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	1	✓
Adult Tail	1	✓
Child No-Neck	1	✓
Pedi (regular size)	6	✓
Pedi (regular size)	8	✓
Stair Chair with straps		
Infant Back Board	4	✓
Infant Stretcher (Scoop)	4	✓
Auxiliary Stretcher (set of 7 sizes)	12	✓
Wrapped Oral Airways 1 each 20f, 22f, 24f, 26f,	1	✓
Wrapped Nasal Airways 1 each 12f, 14f, 16f, 18f	1	✓
Wrapped Nasal Airways 1 each 12f, 14f, 16f, 18f	1	✓
28f, 30f, 32f and 34f	24	✓
Pediatric nasal airways	12	✓
water soluble lubricant	6	✓
Bag Valve Mask Adult w O2 connector tube	12	✓
Bag Valve Mask child & infant w O2 connector tube	12	✓
Bag Valve Mask	12	✓
Small Dressing min 5X9	12	✓
Medium Dressing min 10X30"	12	✓
Large Dressing min 10X30"	3	✓
Roller Bandage - 4" Kling	1	✓
Roller Bandage - 6" Kling	1	✓
Roller Bandages	1	✓
Triangular Bandages	2	✓
1" Tape Hypoallergenic		
1" Tape Shears		
Bandage Sheets		
Burn Sheets		

*phi arm hot  
 hitck  
 pedi*

*ref # 12  
 phi  
 pedi*

*Ben Wynn 12/1/03*

	Required	On Hand
<b>FIRST AID KIT CONTAINING:</b>		
Wrapped Oral Airways (1 each: infant/child/adult)	2	✓
4" x 4" Dressings	12	✓
5" x 9" Dressings	4	✓
10" x 30" Trauma Dressings	2	✓
Roller Bandage - 2" Kling	6	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
<b>DEFIBRILLATOR</b>		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	1	✓
Aluminum Foil Roll	3	✓
Polyethylene Film Roll	1	✓
Bed pad	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	(4)	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
(Ring Cutter)	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

	Required	On Hand
<b>Equipment to Gain Access</b>		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

	Required	On Hand
<b>Latex-Free Equipment</b>		
Latex-free examination gloves, two pairs ea.	1	✓
small, medium & Large		✓
Latex-free tourniquet	1	✓
Latex-free adult BVM and masks	1	✓
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2	✓
Latex-free nasal cannulae and delivery tubes, two each adult and child	2	✓
Latex-free B/P cuff	1	✓
Latex-free stethoscope	1	✓

*only 1 blanket on truck.*

## SHERBORN FIRE DEPARTMENT ALS CHECKLIST

DESCRIPTION	QTY		Expiration Checked
	REQUIRED	ACTUAL	
#24 angiocaths	10	0	yes
#22 angiocaths	10	4	yes
#20 angiocaths	10	<del>4</del> 4	yes
#18 angiocaths	10	4	yes
#16 angiocaths	10	2	yes
#14 angiocaths	10	0	yes
Normal Saline 1,000cc	2	3	yes
Normal Saline 500cc			
Tourniquets	2	✓ 2	
IV extension sets	2	4	
IV Macro drip Admin set	2	✓ 2	
IV Micro drip Admin set	2	0	
Band aids	25	25	
Alcohol wipes	20	30	
Disposable gloves	2	6 sets	N/A
1" tape rolls	2	2	
2*2 gauze pads	15	30	

Inventoried by:

Kim Coffman

Date:

1/25/03

did leave  
the #24  
#14 in the  
box so  
would have  
em, but they  
expired

5 there  
check list  
the  
intubation  
kits?

4 EXPIRED  
3 EXPIRED  
2 EXPIRED  
2 EXPIRED  
4 EXPIRED  
3 EXPIRED

\* Pam, let me know what you want to do  
ith the angiocaths that have expired.



# AMBULANCE CHECKLIST

Sherborn Fire Department  
Sherborn, Massachusetts 01770

Inventoried by: *Kim Coffman*

Date: *2/2/03*

STRETCHER	Required	On Hand
Ambulance Cot w/IV pole	1	✓
Wrist and Ankle Restraints (for cot) set	1	✓
<b>ON BOARD O2 SUPPLIES</b>		
O2 Cylinder Pressure	800 psi	✓
Flow Meter	2	✓
O2 Humidifier (single use)	1	✓
Oximeter (oxygen % and pulse)	1	✓
Sterile Water for Humidifier	4	✓
Adult Non-Rebreathers w/tubing	4	✓
Adult Simple Face masks w/tubing	4	✓
Adult Nasal Cannulas	4	✓
Child Non-Rebreathers w/tubing	4	✓
Child Nasal Cannulas	4	✓
<b>PORTABLE O2 SUPPLIES</b>		
Primary O2 Cylinder Pressure	800 psi	✓
Regulator / flow meter	1	✓
Adult, Child, Infant Face Mask for Resuscitators	2 each	✓
Adult Non-Rebreathers w/tubing	2	✓
Adult Simple Face masks w/tubing	2	✓
Adult Nasal Cannulas	2	✓
bag/valve/mask	1	✓
Full Spare O2 Cylinder (kept in vehicle)	1	✓
<b>ON BOARD SUCTION</b>		
Operational	yes	✓
French suction catheters 2 each 5, 8, 14,	6	✓
Transparent Collection Bottle	1	✓
Suction Rinsing Water Bottle	1	✓
Suction Tubing min 1/4inch in diameter min	2	✓
Pharyngeal Suction Tip	2	✓
<b>PORTABLE SUCTION UNIT</b>		
Operational	yes	✓
Transparent Collection Bottle	1	✓
Wide Bore Tubing w/Pharyngeal Suction Tip	1	✓
Pair Exam Gloves	1	✓
Face Mask / Eye Shield	1	✓
<b>EPINEPHRINE AUTO INJECTORS</b>		
Adult Epi-Pens (within expiration date)	2	✓
Pedi Epi-Pens (within expiration date)	2	✓

ON BOARD E.M.S. SUPPLIES	Required	On Hand
Adult Traction Splint	1	✓
Child Traction Splint	1	✓
Padded Board Splints		
3 foot x 3 inches	2	✓
15 inches x 3 inches	2	✓
4.5 foot x 3 inches	2	✓
K.E.D.	2	✓
Long Back Board w straps 3 sets	2	✓
Head Blocks + Straps sets	2	✓
Cervical Collars: Adult Adjustable	2	✓
Adult No-Neck	2	✓
Adult Short	2	✓
Adult Regular	2	✓
Adult Tail	2	✓
Child No-Neck	2	✓
Pedi (regular size)	2	✓
Stair Chair with straps	1	✓
Infant Back Board	1	✓
Auxiliary Stretcher (Scoop)	1	✓
Wrapped Oral Airways (set of 7 sizes)	6	✓
Wrapped Nasal Airways 1 each 20f, 22f, 24f, 26f,	8	✓
28f, 30f, 32f, and 34f		
Pediatric nasal airways 1 each 12f, 14f, 16f, 18f	4	✓
water soluble lubricant	12	✓
Bag Valve Mask Adult w O2 connector tube	1	✓
Bag Valve Mask child & infant w O2 connector tube	1	✓
Small Dressing min 4X4	24	✓
Medium Dressing min 5X9	12	✓
Large Dressing min 10"X30"	6	✓
Roller Bandage - 4" Kling	12	✓
Roller Bandage - 6" Kling	12	✓
Triangular Bandages	12	✓
1" Tape	3	✓
1" Tape Hypoallergenic	1	✓
Bandage Shears	1	✓
Burn Sheets	2	✓

\*

*2/2/03*  
*100*  
*199*

*ankle hitch*

Kim Coffman

2/2/03

	Required	On Hand
OB Kit	1	✓
Glucose+ wrapped tongue depressors	3	✓
OB Pads	6	✓
Seizer Sticks	6	✓
Poison Antidote Kit w/ Charcoal & measuring	2	✓
Sterile H2O or Saline (3) liters	1	✓
Aluminum Foil Roll	✓	✓
Polyethylene Film Roll	1	✓
Bed pan	1	✓
Motion Sickness Bags	1	✓
Pillows (waterproof)	2	✓
Pillows cases	4	✓
Sheets	8	✓
Blankets	4	✓
Towels	4	✓
Tissue Packages	2	✓
Drinking Cups	2	✓
Ice Packs	4	✓
Hot Packs	4	✓
Infection Control Kit	2	✓
Ring Cutter	1	✓
Infant B.P. Cuff	1	✓
Child B.P. Cuff	1	✓
Adult B.P. Cuff	1	✓
Thigh B.P. Cuff	1	✓
Plastic Bags with Ties	2	✓
Red Bio-Hazard Bags with Ties	2	✓
Sharps Container (covered and secured)	1	✓
Face Mask/Eye Shields	2	✓
Pairs Exam Gloves (various sizes)	6	✓
Hand Cleaner (dispensed)	1	✓

FIRST AID KIT CONTAINING:	Required	On Hand
Wrapped Oral Airways (1 each: infant/child/adult)	2	Main
4" x 4" Dressings	3	✓
5" x 9" Dressings	12	✓
10" x 30" Trauma Dressings	4	✓
Roller Bandage - 2" Kling	2	✓
Roller Bandage - 4" Kling	6	✓
Triangular Bandages	6	✓
Tourniquets	2	✓
Trauma Scissors	1	✓
2" adhesive tape 5 yards min	1	✓
Adult B.P. Cuff	6	✓
Seat belt Cutter	1	✓
Non-Rebreather: Adult/Child	1 each	✓
Wrapped tongue depressors	2	✓
Stethoscope	1	✓
Penlight	1	✓
500cc Sterile water or saline	1	✓
Ice Packs	2	✓
Glucose Tube	1	✓
Band Aids	6	✓
"Mouth to Mouth" Mask	1	✓
Face Mask/Eye Shields	2	✓
Pair of exam Gloves	2	✓
DEFIBRILLATOR		
Batteries Charged and Unit Operational	yes	✓
Sets of Defibrillator Pads	2	✓
Spare Batteries	1	✓
Razor	1	✓
CPR Board (short board)	1	✓

4 + 6" King

Latex-Free Equipment	✓
Latex-free examination gloves, two pairs ea. small, medium & Large	1
Latex-free tourniquet	1
Latex-free adult BVM and masks	1
Latex-free high concentration, disposable, O2 masks with delivery tubes, two each adult and child	2
Latex-free nasal cannulae and delivery tubes, two each adult and child	2
Latex-free B/P cuff	1
Latex-free stethoscope	1

Equipment to Gain Access		
Screwdriver, min 8" regular blade	1	✓
Hacksaw with 6 wire carbide blades	1	✓
Pair of pliers, 10" vice grip	1	✓
Short handled sledge hammer, min 3 Lbs	1	✓
Rope, synthetic, min 50 ft by 1/2" diameter	1	✓
Pair of gloves (leather gauntlets)	2	✓
Pair of goggles (clear eye protective)	2	✓

pair on hand

# SHERBORN FIRE DEPARTMENT ALS CHECKLIST

DESCRIPTION	QTY		Expiration Checked
	REQUIRED	ACTUAL	
#24 angiocaths	10	5	
#22 angiocaths	10	6	
#20 angiocaths	10	5	
#18 angiocaths	10	6	
#16 angiocaths	10	6	
#14 angiocaths	10	3	
Normal Saline 1,000cc	2	3	
Normal Saline 500cc		1	
Tourniquets	2	✓	
IV extension sets	2	4	
IV Macro drip Admin set	2	3	
IV Micro drip Admin set	2	1	in truck
Band aids	25	✓	
Alcohol wipes	20	✓	
Disposable gloves	2	✓	
1" tape rolls	2	✓	
2*2 gauze pads	15	✓	

Inventoried by:

Ben Coffman

Date:

2/2/03



**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 12**  
**Massachusetts Department of Health**  
**Equipment Inspection Report Forms**  
**(1997-2003)**

E-one



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

OBMS  
FORM  
500-22  
(10/2002)



SERVICE NUMBER	SERVICE NAME	AMB. CERT#	EXP	CLASS	VEH TYPE	LEVEL	DATE	UNIT ID NO	PAGE
	Shelburne Fire			1	ILL		04.04.03	A-1	1 of 5
VEHICLE IDENTIFICATION NUMBER	LICENSE PLATE NO	INSPECTED BY	INSPECTION TYPE						
1 FIDLE 40 FIKVH A751173	MF 5253	DF	<input type="checkbox"/> Pre-Inspect <input type="checkbox"/> Remount <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input type="checkbox"/> Renew						
LOCATION	CHASSIS/ DATE	BODY/DATE	MILEAGE						
Headquarters	1/97		120307						
CREW NAME 1	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT			
CREW NAME 2	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	11- CORRECTED DURING INSP. 30- UNSANITARY - BIOHAZARD 20- NOT COMPLIANT 31- UNSANITARY - OTHER 21- PARTIALLY COMPLIANT 90- OTHER			

INSPECTION CODES		BLS SUPPLIES	INSPECTION CODES		BLS SUPPLIES
M01		(1) AMBULANCE COT	M23		(3) IRRIGATION FLUID
M02A		(1) ADULT BAG MASK VENTILATOR	M24		(1) ROLL STERILE ALUMINUM FOIL 12"x25' or adult space blanket
M02B		(1) PEDI & INFANT BAG MASK VENTILATOR	M25		(1) ROLL POLYETHYLENE FILM
M03A		(1) PORTABLE O2 RESUSC. W/ ACCESSORIES	M26		(1) ADULT BEDPAN
M03B		INSTALLED O2 SYSTEM SUPPLIES	M27		(2) MOTION SICKNESS BAGS
M04		1 PORTABLE SUCTION UNIT/with BSI equipment	M28		(2) PILLOWS W/WATERPROOF COVERS
M05		#1 FIRST AID KIT	M29		LINEN: (8) SHEETS - (4) BLANKETS - (4) TOWELS
M05A		#2 FIRST AID KIT	M30		(2) BOXES DISPOSABLE PAPER TISSUES
M06		TRACTION SPLINTS (Adult, Child) W/ACCESSORIES	M31		DISPOSABLE DRINKING CUPS
M07		PADDED BOARD SPLINTS (2 @ 3 SIZES)	M32		(4) COLD PACKS
M08		(1) FULL SPINE BOARD W/ACCESSORIES	M33		(2) INFECTION CONTROL KITS
M08A		(1) HALF SPINE BOARD or KED W/ACCESSORIES	M34		(2) GLUCOSE paste or equiv. w/wrapped tongue depressors
M09		STAIR CHAIR	M35		(1) RING CUTTER
M10		AUXILIARY STRETCHER	M36		(1) EA. SPHYGMOMANOMETER(S) ADULT, CHILD, INFANT, LARGE
M11		TRANSFER SHEET	M37		(1) STETHOSCOPE in patient compartment
M12		AIRWAYS: (6) OROPHARYNGEAL, (8) NASAL (6) PEDI NASAL	M38		(2) PLASTIC BAGS WITH TIES
M13		(24) STERILE GAUZE PADS 4"x4"	M39		CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIE
M14		(12) STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M40		SHARPS CONTAINER - min. 8" height
M15		(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M41		(2) EYE SHIELDS/FACE MASK
M16		(12) ROLLER BANDAGE 3" or 4"	M42		GLOVES - three different sizes
M17		(12) TRIANGULAR BANDAGES	M43		HAND CLEANER
M18		ADHESIVE TAPE (4) 1"x5 w/(1) hypoallergenic	M44		SEMI-AUTOMATIC DEFIBRILATOR (AED)
M19		(1) BANDAGE SHEARS	M45		LATEX FREE KIT
M20		(2) BURN SHEETS - sanitary wrapped	M46		AUTO-INJECTOR EPINEPHRINE
M21		OBSTETRICAL KIT - w/swadler system	M47		CPR BOARD
M22		POISON ANTIDOTE KIT - charcoal w/measuring device	M48		ASPIRIN
			OTHER SUPPLIES		

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR

DATE

SIGNATURE OF PERSON IN CHARGE OF SERVICE

DATE

PLAN OF CORRECTION DUE

4-14-03



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
 FORM  
 500-21  
 (8/98)

V-1

UNIT ID NO. A-1 PAGE 2 of 5

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP	LICENSE PLATE NO	INSPECTOR	DATE	
	<u>Sherborn Fire</u>			<u>5253</u>	<u>DF</u>	<u>9/19/09</u>	
INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER							
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE			INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE		
V01	1		STAR OF LIFE CERTIFICATE - 3.19	V22	1		WHEELS / TIRES - 3.6
V02	1		PAYLOAD ALLOWANCE - 3.5.2	V23	1		CHASSIS - FRAME / BODY MOUNTING - 3.10.7
V03	1		ELECTRICAL LOAD TEST - 3.7.6	V24	1		UNDERCOATING / RUSTPROOFING - 3.17
V04	1		GROSS VEHICLE WEIGHT RATING - 3.5.3	V25	N/A		FOUR WHEEL DRIVE COMPONENTS - 3.18
V05	1		INSTALLED O2 SYSTEM - 3.12.1	V26	1		SUPENSION - 3.6.5.10
V06	1		INSTALLED SUCTION SYSTEM - 3.12.3	V27	1		STEERING - 3.6.8
V07	1		LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1	V28	1		BRAKE SYSTEM - 3.6.5.7
V08	1		SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11	V29	1		EXHAUST SYSTEM - 3.6.4.6
V09	1		LITTER FASTENERS & ANCHORAGES - 3.11.7	V30	1		POWER UNIT - 3.6.3
V10	1		INTERIOR STORAGE ACCOMMODATIONS - 3.11	V31	1		AIR POLLUTION CONTROL - 3.6.4.3
V11	1		INTERIOR SURFACES - 3.10.17	V32	1		FUEL SYSTEM - 3.6.4.4
V12	1		PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8	V33	1		COOLING SYSTEM - 3.6.4.5
V13	21		NO SMOKING/SEAT BELT SIGNS - 3.15.2 <u>MISSING IN EQUIPMENT COMPARTMENT</u>	V34	1		AUTOMATIC TRANSMISSION - 3.6.5.2
V14	1		ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13	V35	1		ELECTRICAL SYSTEM - 3.7.1
V15	1		DOORS/WINDOWS - 3.10	V36	1		BATTERY SYSTEM - 3.7.7
V16	1		BUMPERS & STEPS - 3.9.6	V37	1		DRIVERS COMPARTMENT / CONTROLS - 3.9
V17	21		AMBULANCE BODY STRUCTURE - 3.10 <u>Wheel well trim Damage</u>	V38	1		MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11
V18	1		VEHICLE DIMENSIONS - 3.4.11	V39	1		ENVIRONMENTAL CONTROLS - 3.13
V19	1		EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2	V40	1		WARNING INDICATORS - 3.7.1.1
V20	1		COLOR, PAINT & FINISH - 3.16.2	V41	1		BACKUP ALARM - 3.15.2
V21	1		EMBLEMS & MARKINGS - 3.16	V42	1		HIGH - IDLE SPEED CONTROL - 3.7.6.1
				V43	1		WINDSHIELD WIPERS / WASHERS - 3.7.4
				V44	1		VALID RMV INSPECTION
				V45	1		HORN - 3.7.5
				V46	1		SPOLIGHT - 3.8
				V47	1		OUTSIDE REARVIEW MIRRORS - 3.9.5
				V48	1		SIREN / PUBLIC ADDRESS SYSTEM 3.14
				V49	1		HEADLIGHTS - 3.8
				V50	1		PARKING LIGHTS - 3.8
				V51	1		BRAKE LIGHTS - 3.8



**OEMS FORM  
500-21  
(3/2000)**

**V-2**

UNID ID NO. A-1	PAGE 3 of 5
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YELLOW = OFMS COPY



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

CEMS  
FORM  
500-23  
(10/2002)

A

UNIT ID NO. 17-1 PAGE 4 of 5  
DATE 9/4/03

SERVICE NUMBER	SERVICE NAME	AMB CERT	EXP	LICENSE PLATE	INSPECTOR	DATE	
3928	Sherborn Fire				DF	9/4/03	
INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER							
INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES		INSPECTION CODES		PARAMEDIC SUPPLIES	
E01E			PORTABLE MEDICAL RADIO	P 01			DEFIBRILLATOR/CARDIAC MONITOR with Pacing ability
				P 02			DEFIBRILLATOR ACCESSORIES
A01	1		IV THERAPY EQUIPMENT	P 03			ADENOSINE (ADENOCARD)
A02			CATHETERS, SIZES 14G - 22G (5 ea)	P 04			ALBUTEROL (PROVENTIL, VENTOLIN)
A03			ADMINISTRATION SETS, MACRO/ MICRO (4)	P 05			*AMIODARONE
A04			BURETROL (2) (Paramedic only)	P 06			ASPIRIN
A05	1		VENOUS Tourniquets (4)	P 07			*AMYL NITRITE or CYANIDE ANTIDOTE KIT
A06	1		PADDED ARM BOARDS (2)	P 08			ATROVENT 500 mcg
A07			BIOCLUSIVE IV DRESSING (4)	P 09			ATROPINE SULFATE: 4 mg
A08	1		ALCOHOL PREPS/ ANTISEPTIC SWABS	P 10			BENADRYL: 200mg (Diphenhydramine)
A09	1		FLUIDS IN UNBREAKABLE CONTAINERS	P 11			CALCIUM CHLORIDE: 2gm
A10			NaCL 0.9% 1000ml, 500ml, 250ml, 100ml	P 12			CARDIZEM (Diltiazem HCL) 300mg RT
A11			SALINE FLUSH	P 13			CETACAIN SPRAY
A12			NEEDLES, 18G - 25G (5 ea)	P 14			D5W : LR IV SOLUTIONS
A13			BUTTERFLY 25G, 23G (2)	P 15			D50W: 4 VIALS
A14			INTRAOSSEOUS NEEDLES 15G OR 18G (2)	P 16			DIAZEPAM / VALIUM:
A15			SYRINGES, 1cc, 3cc, 10cc, 30cc (1cc-10cc required Paramedic)	P 17			DOPAMINE (Intropin): 800mg
A16	1		VACUTAINER TUBES & NEEDLE SETS	P 18			EPINEPHRINE 1:1000: 2 AMPS
A17			LEUR LOCK ADAPTER (2)	P 19			EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
A18	1		HEMOSTAT	P 20			GLUCAGON
A19			WATER SOLUBLE LUBRICANT (2)	P 21			LASIX: 200mg (Furosemide)
A 20			TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 22			LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pf SYRINGES @ 100mg 30day @ F
A 21	1		LARYNGOSCOPE HANDLE(S) WITH BATTERIES (ADULT & PEDI)	P 23			LIDOCAINE 2% (Jelly)
A 22	1A		ET TUBES, SIZES 6.0 - 9.0mm (2 EA) - 8.5 9.0	P 24			*LORAZEPAM (Ativan)
A 23			PEDI TUBES, SIZES 2.0 - 5.0 mm (2 EA)	P 25			MAGNESIUM SULFATE
A 24	1		MAGIL FORCEPS (ADULT & PEDI)	P 26			*METOPROLOL (Lopressor)
A 25	1		SPARE BATTERIES & BULB	P 27			MIDAZOLAM (VERSED)
A26			STYLETTE, COPPER OR FLEXIBLE (ADULT & PEDI)	P 28			MORPHINE SULFATE: PER PROTOCOL (SCH II)
A27	1		STRAIGHT & CURVED BLADES (ADULT & PEDI)	P 29			NARCAN (Naloxone): 4 AMP @ 1ml
A28			NEBULIZER (ADULT & PEDI) (2 EA)	P 30			*NIEDIPINE (Procardia)
A29	1		INTUBATION CONFIRMATION DEVICE	P 31			NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A30	1		RESCUE AIRWAY	P 32			SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A31	1		NASOGASTRIC TUBES 5F, 8F, 10F, 14F (2 EA)	P 33			THIAMINE: 200mg
A32	1		PULSE OXIMETER	P 34			*TERBUTALINE, TETRACAINE
A33			GLUCOMETER (MULTI PATIENT USE)	P 35			PEDIATRIC LENGTH BASED TAPE

MA014A236



OEMS  
FORM  
500 - 24  
(4/ 2001)

**S**

PAGE  
5 OF

SERVICE NUMBER	SERVICE NAME	LICENSEE	DATE
	Sherborn Fire Department	Town of Sherborn	04/04/03
	ADDRESS 22 North Main Street	BUSINESS PHONE	INSPECTOR DE
	CITY / STATE / ZIP Sherborn MA.	MANAGER NAME Fire Chief Neil McPherson	OFFICE USE ONLY
INSPECTION CODES	1 = COMPLIANT 11 = CORRECTED DURING INSPECTION	20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT	30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER 90 = OTHER
INSPECTION CODES		SERVICE OPERATIONS 170.200 ET SEQ	
S 01	1	LICENSURE	
S 02	1	CERTIFICATION OF VEHICLES & PERSONNEL	
S 03	1	STAFFING	
S 04	1	INSURANCE	
S 05	1	ADVERTISING	
S 06	1	INCIDENT OR ACCIDENT REPORTS	
S 07	1	DISPLAY OF LICENSE	
S 08	1	RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT	
S 09	1	PUBLIC ACCESS	
S 10	1	DISPATCH COMMUNICATIONS	
S 11	1	MEDICAL COMMUNICATIONS	
S 12	1	AVAILABILITY & BACKUP	
S 13	N/A	SPECIAL REQUIREMENTS TO OPERATE CLASS V	
S 14	1	GARAGE - HEATED, DEBRIS FREE	
S 15	1	STORAGE SPACE	
S 16	X21	SUPPLIES inadequate Amount of Proper Sizes OF ET TUBES 8.0, 8.5, 9.0	
S 17	1	NON - DISCRIMINATION	
S 18	1	AFFILIATION AGREEMENT	
S 19	1	ALS OPERATIONS	
S 20	N/A	PROVISIONS FOR ALS STAFFING WAIVERS	
S 21	1	REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995	
RECORDS 170.240			
S 22	X21	PERSONNEL ACLS CARDS MISSING OR EXPIRED	
S 24	1	PREVENTIVE MAINTENANCE	
S 25	1	VEHICLE REGISTRATION	
S 26	N/A	FAA CERTIFICATION (CLASS IV)	
S 27	N/A	LICENSES FOR PILOTS (CLASS IV)	
S 28	N/A	FCC LICENSES	
S 29	X21	TRIP RECORDS Need to improve Documentation PATIENT REFUSALS MINIMAL Documentation	
S 30	1	TRIP RECORDS LEFT @ RECEIVING FACILITY	
S 31	1	CONSTAT Billing Service	
INSPECTION CODES		WRITTEN POLICIES & PROCEDURES 170.330	
S 27	1	CERTIFICATION & RECERT OF EMT'S	
S 28	1	RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT	
S 29	1	DUTIES OF TRANSPORTATION: DELIVERY OF PT. TO NEAREST APP. FACILITY	
S 30	1		
S 31	1	NON - DISCRIMINATION	
S 32	1	BACKUP SERVICES	
S 33	1	DISPATCH	
S 34	1	COMMUNICATIONS	
S 35	1	STOCKING SUPPLIES	
S 36	1	SANITARY PRACTICES	
S 37	1	USE OF LIGHTS & WARNING SIGNALS	
S 38	1	STAFFING OF AMBULANCES	
S 39	1	CONDUCT OF PERSONNEL	
S 40	1	MECHANICAL FAILURES	
S 41	1	INSPECTION AUTHORITIES	
S 42	1	TRANSPORT OF DEAD BODIES	
S 43	1	PARENT RIGHTS	
S 44	1	PATIENT RESTRAINTS	
S 45	1	DISPOSAL OF HAZARDOUS WASTE	
S 46	1	MANDATED REPORTING	
S 47	1	INFECTION CONTROL PROCEDURES	
S 48	1	DESIGNATED INFECTION CONTROL OFFICER	
S 49	1	TRIP RECORDS LEFT @ RECEIVING OFFICER	
S 50	1	COMPLIANCE WITH STATEWIDE TREATMENT PROTOCOLS	
S 51	1	MAINTENANCE OF MECHANICAL & BIOMEDICAL EQUIP	
S 52	N/A	ORIENTATION AMBULANCE SERVICE EMPLOYEES	
S 53	1	CONTROL & INSPECTION OF EPI - PENS	
S 54	1	ALS POLICIES:	
S 55	1	HOURS OF ALS SERVICE PROVIDED call dept 24-7	
S 56	1	ARRANGEMENTS SECURING ADDITIONAL TRAINED PERSONNEL	
S 57	1	DRUG SECURITY & EXCHANGE	







*The Commonwealth of Massachusetts  
Department of Public Health  
Office of Emergency Medical Services*

SERVICE NUMBER  
3928

VALID DATE  
6/30/03 - 6/30/04

## AMBULANCE CERTIFICATE OF INSPECTION

This ambulance has been inspected by the Department in accordance with the provisions of Massachusetts General Laws, chapter 111C, section 7, and the Massachusetts Ambulance Regulations, 105 CMR 170.000, section 170.415, established thereunder an Ambulance Certificate of Inspection is hereby granted to:

### LICENSEE

Town of Sherborn  
Town Offices, 19 Washington St.  
Sherborn, MA 01770

for

### AMBULANCE SERVICE

Sherborn Fire Dept. Rescue Squad  
22 North Main St.  
Sherborn, MA 01770

Class  
1

Vehicle Identification No.  
1FDLE40FXVHA75173

Unit No.  
A1

Waiver(s)  
Y

Vehicle Registration No  
Fire 5253

*Charles C. Ferguson*

Commissioner  
Department of Public Health

*Laurie Mayette*

Director  
Office of Emergency Medical Services

This certificate is subject to revocation or suspension for cause pursuant to M.G.L., chapter 111c, section 10; and it is not transferable.

This Certificate of Inspection shall be displayed in the Ambulance for which it was issued, in a manner so that it is readily visible to any person in the patient compartment.



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

CEMS  
FORM  
500-22  
(5/2000)



SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>SHERBORN FIRE DEPARTMENT</b>	AMB. CERT#	EXP	CLASS	VEH. TYPE	LEVEL	DATE <b>04.05.02</b>	
VEHICLE IDENTIFICATION NUMBER <b>1F1D1L1E14101F1X1V1H1A171S111713</b>	LICENSE PLATE NO <b>MF 5253</b>	INSPECTED BY <b>DF</b>	INSPECTION TYPE <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input checked="" type="checkbox"/> Renew	UNIT ID NO <b>A-1</b>				PAGE <b>7 of 5</b>
LOCATION	CHASSIS/ DATE <b>1/97</b>	BODY/DATE	MILEAGE <b>117,541</b>					
CREW NAME 1	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT		
CREW NAME 2	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	11- CORRECTED DURING INSP. 30- UNSANITARY - BIOHAZARD		
						20- NOT COMPLIANT 31- UNSANITARY - OTHER		
						21- PARTIALLY COMPLIANT 90- OTHER		

INSPECTION CODES		BLS SUPPLIES	INSPECTION CODES		BLS SUPPLIES
M01		(1) AMBULANCE COT	M23		(3) IRRIGATION FLUID
M02A		(1) ADULT BAG MASK VENTILATOR	M24		(1) ROLL STERILE ALUMINUM FOIL 12"x25' or adult space blanket
M02B		(1) PEDI & INFANT BAG MASK VENTILATOR	M25		(1) ROLL POLYETHYLENE FILM
M03A		(1) PORTABLE O2 RESUSC. W/ ACCESSORIES	M26		(1) ADULT BEDPAN
M03B		INSTALLED O2 SYSTEM SUPPLIES	M27		(2) MOTION SICKNESS BAGS
M04		1 PORTABLE SUCTION UNIT/with BSI equipment	M28		(2) PILLOWS W/WATERPROOF COVERS
M05		#1 FIRST AID KIT	M29		LINEN: (8) SHEETS - (4) BLANKETS - (4) TOWELS
M05A		#2 FIRST AID KIT	M30		(2) BOXES DISPOSABLE PAPER TISSUES
M06		TRACTION SPLINTS (Adult, Child)W/ACCESSORIES	M31		DISPOSABLE DRINKING CUPS
M07		PADDED BOARD SPLINTS (2 @ 3 SIZES)	M32		(4) COLD PACKS
M08		(1) FULL SPINE BOARD W/ACCESSORIES	M33		(2) INFECTION CONTROL KITS
M08A		(1) HALF SPINE BOARD or KED W/ACCESSORIES	M34		(2) GLUCOSE paste or equiv. w/wrapped tongue depressors
M09		STAIR CHAIR	M35		(1) RING CUTTER
M10		AUXILIARY STRETCHER	M36		(1) EA. SPHYGMOMANOMETER(S) ADULT, CHILD, INFANT, LARGE
M11		TRANSFER SHEET	M37		(1) STETHOSCOPE in patient compartment
M12		AIRWAYS: (6) OROPHARYNGEAL, (8) NASAL (6) PEDI NASAL	M38		(2) PLASTIC BAGS WITH TIES
M13		(24) STERILE GAUZE PADS 4"x4"	M39		CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIES
M14		(12) STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M40		SHARPS CONTAINER - min. 8" height
M15		(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M41		(2) EYE SHIELDS/FACE MASK
M16		(12) ROLLER BANDAGE 3" or 4"	M42		GLOVES - three different sizes
M17		(12) TRIANGULAR BANDAGES	M43		HAND CLEANER
M18		ADHESIVE TAPE (4) 1"x5 w/(1) hypoallergenic	M44		SEMI-AUTOMATIC DEFIBRILATOR (AED) - effective 3/2002
M19		(1) BANDAGE SHEARS	M45		LATEX FREE KIT
M20		(2) BURN SHEETS - sanitary wrapped	OTHER SUPPLIES		
M21		OBSTETRICAL KIT - w/swadler system			
M22		POISON ANTIDOTE KIT - charcoal w/measuring device			
Z01		AUTO-INJECTOR EPINEPHRINE	<b>Not Accessible from Pt Compartment</b> CPR BOARD		
Z02					

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR: *[Signature]* DATE: **04-05-02** SIGNATURE OF PERSON IN CHARGE OF SERVICE: *[Signature]* DATE: **04-15-02**

PLAN OF CORRECTION DUE: **04-15-02**





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - SERVICE

OEMS  
 FORM  
 500 - 24  
 (4/ 2001)

**S**

PAGE  
 2 OF 5

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Sherborn Fire Department</b>	LICENSEE <b>Town of Sherborn</b>	DATE <b>04/10/02</b>
ADDRESS		BUSINESS PHONE	INSPECTOR <b>D</b>
CITY / STATE / ZIP <b>Sherborn MA 01850</b>		MANAGER NAME	
INSPECTION CODES 1 = COMPLIANT 20 = NOT COMPLIANT 30 = UNSANITARY - BIOHAZARD 90 = OTHER 11 = CORRECTED DURING INSPECTION 21 = PARTIALLY COMPLIANT 31 = UNSANITARY - OTHER			

INSPECTION CODES		SERVICE OPERATIONS 170.200 ET SEQ	INSPECTION CODES		WRITTEN POLICIES & PROCEDURES 170.330
S 01		LICENSURE	S 27		CERTIFICATION & RECERT OF EMT'S
S 02		CERTIFICATION OF VEHICLES & PERSONNEL	S 28		RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT
S 03		STAFFING	S 29		DUTIES OF TRANSPORTATION: DELIVERY OF PT. TO NEAREST APP. FACILITY
S 04		INSURANCE	S 30		
S 05		ADVERTISING	S 31		NON - DISCRIMINATION
S 06		INCIDENT OR ACCIDENT REPORTS	S 32		BACKUP SERVICES
S 07		DISPLAY OF LICENSE	S 33		DISPATCH
S 08		RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT	S 34		COMMUNICATIONS
S 09		PUBLIC ACCESS	S 35		STOCKING SUPPLIES
S 10		DISPATCH COMMUNICATIONS	S 36		SANITARY PRACTICES
S 11		MEDICAL COMMUNICATIONS	S 37		USE OF LIGHTS & WARNING SIGNALS
S 12		AVAILABILITY & BACKUP	S 38		STAFFING OF AMBULANCES
S 13		SPECIAL REQUIREMENTS TO OPERATE CLASS V	S 39		CONDUCT OF PERSONNEL
S 14		GARAGE - HEATED, DEBRIS FREE	S 40		MECHANICAL FAILURES
S 15		STORAGE SPACE	S 41		INSPECTION AUTHORITIES
S 16		SUPPLIES	S 42		TRANSPORT OF DEAD BODIES
S 17		NON - DISCRIMINATION	S 43		PARENT RIGHTS
S 18		AFFILIATION AGREEMENT	S 44		PATIENT RESTRAINTS
S 19		ALS OPERATIONS	S 45		DISPOSAL OF HAZARDOUS WASTE
S 20		PROVISIONS FOR ALS STAFFING WAIVERS	S 46		MANDATED REPORTING
S 21		REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995 <b>MA 0146236 Sched 4</b> <b>22 North MAIN St. Expires 12-31-02</b>	S 47		INFECTION CONTROL PROCEDURES
<b>RECORDS 170.240</b>			S 48		DESIGNATED INFECTION CONTROL OFFICER
S 22		PERSONNEL	S 49		TRIP RECORDS LEFT @ RECEIVING OFFICER
S 24		PREVENTIVE MAINTENANCE	S 50		COMPLIANCE WITH STATEWIDE TREATMENT PROTOCOLS
S 25		VEHICLE REGISTRATION	S 51		MAINTENANCE OF MECHANICAL & BIOMEDICAL EQUIP
S 26		FAA CERTIFICATION (CLASS IV)	S 52		ORIENTATION AMBULANCE SERVICE EMPLOYEES
S 27		LICENSES FOR PILOTS (CLASS IV)	S 53		CONTROL & INSPECTION OF EPI - PENS
S 28		FCC LICENSES	S 54		ALS POLICIES:
S 29		TRIP RECORDS	S 55		HOURS OF ALS SERVICE PROVIDED
S 30		TRIP RECORDS LEFT @ RECEIVING FACILITY	S 56		ARRANGEMENTS SECURING ADDITIONAL TRAINED PERSONNEL
			S 57		DRUG SECURITY & EXCHANGE



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
 FORM  
 500-21  
 (8/96)

**V-1**

UNIT ID NO. A-1 PAGE 3 OF 5  
 INSPECTOR DF DATE 04.05.07

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP	LICENSE PLATE NO	INSPECTOR	DATE
	<u>Shepherd Fire</u>			<u>5253</u>	<u>DF</u>	<u>04.05.07</u>
INSPECTION CODES: 1 - COMPLIANT, 20 - NOT COMPLIANT, 30 - UNSANITARY - BIOHAZARD, 90 - OTHER 11 - CORRECTED DURING INSPECTION, 21 - PARTIALLY COMPLIANT, 31 - UNSANITARY - OTHER						
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE					
V01						STAR OF LIFE CERTIFICATE - 3.19
V02						PAYLOAD ALLOWANCE - 3.5.2
V03						ELECTRICAL LOAD TEST - 3.7.6
V04						GROSS VEHICLE WEIGHT RATING - 3.5.3
V05						INSTALLED O2 SYSTEM - 3.12.1
V06						INSTALLED SUCTION SYSTEM - 3.12.3
V07						LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1
V08						SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11
V09						LITTER FASTENERS & ANCHORAGES - 3.11.7
V10						INTERIOR STORAGE ACCOMMODATIONS - 3.11
V11						INTERIOR SURFACES - 3.10.17
V12						PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8 <u>Multiple lights out (intermittent)</u>
V13						NO SMOKING/SEAT BELT SIGNS - 3.15.2
V14						ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13
V15						DOORS/WINDOWS - 3.10
V16						BUMPERS & STEPS - 3.9.6
V17						AMBULANCE BODY STRUCTURE - 3.10
V18						VEHICLE DIMENSIONS - 3.4.11
V19						EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2
V20						COLOR, PAINT & FINISH - 3.16.2
V21						EMBLEMS & MARKINGS - 3.16
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE					
V22						WHEELS / TIRES - 3.6
V23						CHASSIS - FRAME / BODY MOUNTING - 3.10.7
V24						UNDERCOATING / RUSTPROOFING - 3.17
V25						FOUR WHEEL DRIVE COMPONENTS - 3.16
V26						SUPENSION - 3.6.5.10
V27						STEERING - 3.6.6
V28						BRAKE SYSTEM - 3.6.5.7
V29						EXHAUST SYSTEM - 3.6.4.6
V30						POWER UNIT - 3.6.3
V31						AIR POLLUTION CONTROL - 3.6.4.3
V32						FUEL SYSTEM - 3.6.4.4
V33						COOLING SYSTEM - 3.6.4.5
V34						AUTOMATIC TRANSMISSION - 3.6.5.2
V35						ELECTRICAL SYSTEM - 3.7.1
V36						BATTERY SYSTEM - 3.7.7
V37						DRIVERS COMPARTMENT / CONTROLS - 3.9
V38						MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11
V39						ENVIRONMENTAL CONTROLS - 3.13
V40						WARNING INDICATORS - 3.7.1.1
V41						BACKUP ALARM - 3.15.2
V42						HIGH - IDLE SPEED CONTROL - 3.7.6.1
V43						WINDSHIELD WIPERS / WASHERS - 3.7.4
V44						VAILD RMV INSPECTION
V45						HORN - 3.7.5
V46						SPOLIGHT - 3.8
V47						OUTSIDE REARVIEW MIRRORS - 3.9.5
V48						SIREN / PUBLIC ADDRESS SYSTEM 3.14
V49						HEADLIGHTS - 3.8
V50						PARKING LIGHTS - 3.8
V51						BRAKE LIGHTS - 3.8



OEMS FORM  
500-21  
(3/2000)

V-2

UNIT ID NO.	PAGE
A-1	4 OF 5
CTOR	DATE
F	040502

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP.	LICENSE PLATE NO	INSPECTOR	DATE
3928	Sharborn Fire			5253	DF	040592
INSPECTION CODES		1 - COMPLIANT 11 - CORRECTED DURING INSPECTION		20 - NOT COMPLIANT 21 - PARTIALLY COMPLIANT		30 - UNSANITARY - BIOHAZARD 31 - UNSANITARY - OTHER
INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE				
V52		1			BACKUP LIGHTS - 3.8	
V53		1			TURN SIGNALS - 3.8	
V54		1			SIDEMARKER LIGHTS FLASH W /TURN SIGNALS) - 3.8	
V55		1			LICENSE PLATE LAMP (S) - 3.8	
V56					HAZARD WARNING LIGHTS - 3.8	
V57		1			CLEARANCE LAMPS (OPTIONAL) - 3.8	
V58		1			EMERGENCY LIGHTING - 3.8.2	
V59	X	21			FLOOD & LOAD LIGHTS - 3.8 Stepwell light inoperable Driver Door + Tech. Impro. Done	
V60		1			VEHICLE PERFORMANCE - 3.4	
V61		1			MANUALS, & HANDBOOK OF INSTRUCTION - 3.2	
V62		1			WORKMANSHIP - 3.23	
VEHICLE EQUIPMENT						
E01		1			EQUIPMENT TO GAIN ACCESS	
E03		1			MAPS	
E04	X	21			FIRE EXTINGUISHERS, 1 IN PT. COMPT. INSPECTION TAG OUT OF DATE 1998	
E05		1			(2) SIX VOLT HANDLIGHTS	
E06		1			(2) CHOCK BLOCKS	
E07		1			(6) DOT TRIANGULAR REFLECTORS OR EQUIV.	
E08		1			HAZARDOUS MATERIAL GUIDEBOOKS	
E09		1			BINOCULARS - 7x35 min.	
E10		1			(25) TRIAGE TAGS	
E11		1			PROTECTIVE EQUIPMENT (anticipated exposures) (x2)	
E 12		1			(1) REFLECTIVE GARMENT OR Equiv. per crew member	
E 13		1			(1) SET HEPA RESPIRATORS OR EQUIV	
VEHICLE CONT						
R01		1			TWO WAY RADIO DISPATCH	
R02		1			TWO WAY RADIO HOSPITAL	
R03					PORTABLE HOSPITAL RADIO (ALS)	
OTHER DEFICIENCIES						
NOTICE TO LICENSEE						
<input type="checkbox"/> <b>AMBULANCE OUT OF SERVICE UNTIL THE FOLLOWING SERIOUS DEFICIENCIES ARE CORRECTED</b>						
NSD #						





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

OEMS  
 FORM  
 500 - 23  
 (4/ 2001)

**A**

UNIT ID NO **171** PAGE **5** OF **5**

SERVICE NUMBER <b>3925</b>	SERVICE NAME <b>Shorham Fire Dept</b>	AMB CERT	EXP	LICENSE PLATE <b>5253</b>	INSPECTOR <b>DF</b>	DATE <b>040506</b>
INSPECTION CODES 1 = COMPLIANT 11 = CORRECTED DURING INSPECTION		20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT		30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER		90 = OTHER

INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES		PARAMEDIC SUPPLIES
E01E		PORTABLE MEDICAL RADIO	P01		DEFIBRILLATOR / CARDIAC MONITOR with Pacing ability
			P02		DEFIBRILLATOR ACCESSORIES
A01		IV THERAPY EQUIPMENT	P03		ADENOSINE (ADENOCARD)
A02		CATHETERS, SIZES 14G - 22G (5 ea)	P04		ALBUTEROL (PROVENTIL, VENTOLIN)
A03		ADMINISTRATION SETS, MACRO / MICRO (4)	P05		AMIODARONE
A04		BURETROL (2) (Paramedic only)	P06		ASPIRIN
A05		VENOUS TOURNIQUETS (4)	P07		AMYL NITRITE or CYANIDE ANTIDOTE KIT (V only)
A06		PADDED ARM BOARDS (2)	P08		ATROVENT 500 mcg
A07		BIOCLUSIVE IV DRESSING (4)	P09		ATROPINE SULFATE: 4 mg
A08		ALCOHOL PREPS / ANTISEPTIC SWABS	P10		BENADRYL: 200mg (Diphenhydramine)
A09		FLUIDS IN UNBREAKABLE CONTAINERS	P11		BRETYLIUM TOSALATE: 50 mg / ml: 4 Amp @ 10 ml
A10		NaCL 0.9% 1000ml, 500ml, 250ml, 100ml	P12		CALCIUM CHLORIDE: 2gm
A11		SALINE FLUSH ??	P13		CARDIZEM (Diltiazem HCL) 300mg RT
A12		NEEDLES, 18G - 25G (5 ea)	P14		CETACINE SPRAY
A13		BUTTERFLY 25G, 23G (2)	P15		D5W : LR IV SOLUTIONS
A14		INTRAOSSEOUS NEEDLES 15G OR 18G (2)	P16		D50W: 4 WALS
A15		SYRINGES, 1cc, 3cc, 10cc, 30cc (1cc - 10cc required Paramedic)	P17		DIAZEPAM / VALIUM:
A16		VACUTAINER TUBES & NEEDLE SETS	P18		DOPAMINE: 800mg
A17		LEUR LOCK ADAPTER (2)	P19		EPINEPHRINE 1:1000:2 AMPS
A18		HEMOSTAT	P20		EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
A19		WATER SOLUBLE LUBRICANT (2)	P21		GLUCAGON
A20		TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P22		LASIX 200mg (Furosemide)
A21		LARYNGOSCOPE HANDLE(S) WITH BATTERIES (ADULT & PEDI)	P23		LIDOCAINE HCL: 2 VIALS @ 2gm, 1 pt SYRINGES @ 100mg 30day @ RT
A22	X21	ET TUBES, SIZES 6.0 - 9.0mm (2 EA) - 7.5 out of date 8.5 + 9.0 missing	P24		LIDOCAINE 2% (Jelly)
A23	X21 II	PEDI TUBES, SIZES 2.0 - 5.0 mm (2 EA) - 2.0, 3.5	P25		LORAZEPAM (Ativan) (3 & 4 only)
A24		MAGIL FORCEPS (ADULT & PEDI)	P26		MAGNESIUM SULFATE
A25		SPARE BATTERIES & BULB	P27		MIDAZOLAM (VERSED) (1, 2, 3, 4, only)
A26		STYLETTE, COPPER OR FLEXIBLE (ADULT & PEDI)	P28		MORPHINE SULFATE: PER PROTOCOL (SCH II)
A27		STRAIGHT & CURVED BLADES (ADULT & PEDI)	P29		NARCAN (Naloxone): 4 AMP @ 1ml
A28		NEBULIZER (ADULT & PEDI) (2 EA)	P30		NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A29	X21	INTUBATION CONFIRMATION DEVICE - PEDI Device	P31		SODIUM BICARBONATE: 8 PE SYRINGES @ 50ml
A30		RESCUE AIRWAY	P32		THIAMINE: 200mg
A31		NASOGASTRIC TUBES 5F, 8F, 10F, 14F (2 EA)	P33		TERBUTALINE, TETRACAINE (3 & 4 ONLY)
A32		PULSE OXIMETER	P34		VERAPAMIL: (Isoptin) 4 AMPS @ 2ml
		GLUCOMETER (MULTI PATIENT USE)	P35		PEDIATRIC LENGTH BASED TAPE



**Massachusetts Department of Public Health  
Office of Emergency Medical Services  
Ambulance Regulation Program  
PLAN OF CORRECTION**



Service Number  
**319218**

License Expiration Date  
**May 02**

Insp.  
**Fletcher**

RESPONSE DUE BY:

Service Name **Sherborn Fire Department**

VEHICLE INFORMATION (If Applicable)	
License Plate Number <b>MF 5253</b>	Is this vehicle a(n) <u>      </u> Addition <u>      </u> Replacement <input checked="" type="checkbox"/> Renewal
Ambulance Class <b>I</b>	Vehicle Unit Id <b>A1</b>
Vehicle Identification Number <b>1FDLE40FXVHA75173</b>	

Page	Citation	Providers Plan of Correction (provide details of corrective action that satisfies reported deficiencies) (for page and citation number refer to inspection report form)	Completion Date
2	S50	Added paragraph stating in compliance w/ statewide protocols	4/5/02
2	S52	Orientation package - work in progress	12/31/02
4	V59	Light fixed	4/5/02
4	E04	Service fire extinguisher	6/30/02
5	A22	Sizes replaced	4/5/02
5	A29	padi devices purchased	4/5/02
Licensee representative's signature <b>Pamela Dwyer</b>		Title <b>LT</b>	Date <b>4/24/02</b>



The Commonwealth of Massachusetts  
Department of Public Health  
Office of Emergency Medical Services

SERVICE NUMBER	3928
VALID DATE	6/22/02 - 6/30/03

## AMBULANCE CERTIFICATE OF INSPECTION

This ambulance has been inspected by the Department in accordance with the provisions of Massachusetts General Laws, chapter 111C, section 7, and the Massachusetts Ambulance Regulations, 105 CMR 170.000, section 170.415, established thereunder an Ambulance Certificate of Inspection is hereby granted to:

### LICENSEE

Town of Sherborn  
Town Offices, 19 Washington St.  
Sherborn, MA 01770

for

### AMBULANCE SERVICE

Sherborn Fire Dept. Rescue Squad  
22 North Main St.  
Sherborn, MA 01770

Class  
1

Vehicle Identification No.  
IFDLE40FXVHA75173

Unit No.  
A1

Waiver(s)  
Y

Vehicle Registration No  
Fire 5253

*Harold K. Kahwa*

*Joanna Molyneux*

Commissioner  
Department of Public Health

Director  
Office of Emergency Medical Services

This certificate is subject to revocation or suspension for cause pursuant to M.G.L., chapter 111C, section 10, and it is not transferable.

This Certificate of Inspection shall be displayed in the Ambulance for which it was issued, in a manner so that it is readily visible to any person in the patient compartment.





UNIT ID NO. 4-1	PAGE 6 OF 6
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SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT	EXP	LICENSE PLATE NO.	INSPECTOR	DATE
	Sharboorn Fire Department				DF	06/22/91
ITEM NO	INSPECTION CODES	DESCRIPTION				
		Recommendations For Garaging Area.				
		1) DIRECTIONS ON how to Refill CO <sub>2</sub> TANKS using CASCADE system mounted on the wall above tanks.				
		2) Cleaning instructions FOR Equipment mounted + Laminate over Decontamination AREA. With MSDS sheets FOR cleaning Solvents.				



PAGE 5 OF 5

SERVICE NUMBER	SERVICE NAME	LICENSEE	DATE
3928	Sherborn Fire Department	Town of Sherborn	06.22.01
ADDRESS	22 North Main Street	BUSINESS PHONE	508-651-7869
CITY/STATE/ZIP	Sherborn Mass 01770	INSPECTOR	DF
		MANAGER NAME	Ronald J. Buckler
INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER			
INSPECTION CODES		SERVICE OPERATIONS 170.200 ET SEQ	
S 01	1	LICENSURE	
S 02	1	CERTIFICATION OF VEHICLES & PERSONNEL	
S 03	1	STAFFING	
S 04	1	INSURANCE Self Insured	
S 05	1	ADVERTISING	
S 06		INCIDENT OR ACCIDENT REPORTS	
S 07	1	DISPLAY OF LICENSE	
S 08	1	RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT	
S 09	1	PUBLIC ACCESS	
S 10		DISPATCH COMMUNICATIONS	
S 11		MEDICAL COMMUNICATIONS	
S 12	1	AVAILABILITY & BACKUP	
S 13	N/A	SPECIAL REQUIREMENTS TO OPERATE CLASS V	
S 14	1	HEATED GARAGE New	
S 15	1	STORAGE SPACE Decon Area (New)	
S 16	1	SUPPLIES	
S 17	1	NON-DISCRIMINATION Needs updating	
S 18	1	AFFILIATION AGREEMENT Dr. Zeeman Merrimack Medical Center Natick	
S 19	1	ALS PROCEDURES & POLICIES	
S 20	1	REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995	
RECORDS 170.240			
S 21	1	PERSONNEL	
S 22		PREVENTIVE MAINTENANCE	
S 23		VEHICLE REGISTRATION	
S 24	N/A	FAA CERTIFICATION (CLASS IV)	
S 25	N/A	LICENSES FOR PILOTS (CLASS IV)	
S 26	1	FCC LICENSES	
S 27		TRIP RECORDS	
S 28		TRIP RECORDS LEFT @ RECEIVING FACILITY	
INSPECTION CODES		WRITTEN POLICIES & PROCEDURES 170.235	
S 27	1	CERTIFICATION & RECERT OF PERSONNEL	
S 28	1	RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT	
S 29	1	DELIVERY OF PT. TO NEAREST APP. FACILITY	
S 30	1	NON-DISCRIMINATION	
S 31	1	BACKUP SERVICES	
S 32	1	USE OF BACKUP SERVICES	
S 33	1	DISPATCH	
S 34	1	COMMUNICATIONS	
S 35	1	STOCKING SUPPLIES	
S 36	1	SANITARY PRACTICES	
S 37	1	USE OF LIGHTS & WARNING SIGNALS	
S 38	1	STAFFING OF AMBULANCES	
S 39	1	CONDUCT OF PERSONNEL	
S 40	1	MECHANICAL FAILURES	
S 41	1	INSPECTION AUTHORITIES	
S 42	1	TRANSPORT OF DEAD BODIES	
S 43	1	PARENT RIGHTS	
S 44	1	PATIENT RESTRAINTS	
S 45	1	DISPOSAL OF HAZARDOUS WASTE	
S 46	1	MANDATED REPORTING	
S 47	1	INFECTION CONTROL PROCEDURES	
S 48	1	DESIGNATED INFECTION CONTROL OFFICER	
S 49	1	TRIP RECORDS LEFT @ RECEIVING FACILITIES	
S 50	1	INFECTION CONTROL PROCEDURES	
S 51	1	MAINTENANCE OF DEFIBRILLATOR	
S 52	1	CONTROL & INSPECTION OF EPI-PENS	



Station #1

Intermediate level

4 of 6



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

CEMS  
FORM  
500-23  
(3/99)

A

UNIT ID NO A-1 PAGE 4 OF 5

SERVICE NUMBER 3928	SERVICE NAME Sharborn Fire Department	AMB CERT 5.27.01	EXP 5.27.01	LICENSE PLATE FIRE 5232	INSPECTOR DF	DATE 06.27.01
INSPECTION CODES 1 - COMPLIANT 11 - CORRECTED DURING INSPECTION		20 - NOT COMPLIANT 21 - PARTIALLY COMPLIANT		30 - UNSANITARY - BIOHAZARD 31 - UNSANITARY - OTHER		90 - OTHER

INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES		PARAMEDIC SUPPLIES
E01E		PORTABLE MEDICAL RADIO	P 01		DEFIBRILLATOR/ CARDIAC MONITOR
			P02		DEFIBRILLATOR ACCESSORIES
A01	1	IV THERAPY EQUIPMENT	P 03		ADENOSINE (ADENOCARD)
A02	1	CATHETERS, SIZES 14G - 25G	P 04		ALBUTEROL (PROVENTIL, VENTOLIN)
A03	1	ADMINISTRATION SETS, MACRO/ MICRO	P 05		AMINOPHYLLINE: 2 AMP @ 10 OR 20ml (interfacility)
A04	1	VENOUS Tourniquets	P 06		ASPIRIN
A05	1	PADDED ARM BOARDS	P 07		AMYL NITRITE (V only)
A06	1	1" ADHESIVE TAPE OR EQUAL	P 08		ATROVENT 500 mcg
A07	1	ALCOHOL PREPS/ ANTISEPTIC SWABS	P 09		ATROPINE SULFATE: 4 mg
A08	1	FLUIDS IN UNBREAKABLE CONTAINERS	P 10		BENADRYL: 200mg (Diphenhydramine)
A09	1	D5W/D10/D25 LACTATED RINGERS / NS 9% (D5 REGION 2 ONLY) Sodium chloride	P 11		BRETYLIUM TOSALATE: 50 mg/ml: 4 Amp @ 10ml
A10	1	NEEDLES, 18G - 21G, 1/2" - 2"	P 12		CALCIUM CHLORIDE: 2gm
A11	1	SYRINGES, 30cc & 50cc	P 13		CARDIZEM (Diltiazem HCL) 30D@RT
A12	1	VACUTAINER TUBES & NEEDLE SETS	P 14		CETACAIN SPRAY
A13	1	BLOOD LABELS	P 15		D5W: (2 only) D10W: D25W
A14	1	EOA/ EGTA/ ET 6.0 + 7.5 outdated	P 16		D50W: 4 VIALS
A15	1	30cc SYRINGE (EOA/EGTA)	P 17		DIAZEPAM / VALIUM:
A16	1	HEMOSTAT (EOA/EGTA)	P 18		DOBUTAMINE: 2 VIALS @ 20ml (interfacility)
A17	1	WATER SOLUBLE LUBRICANT (EOA/EGTA)	P 19		DOPAMINE: 800mg
A18	1	TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 20		EPINEPHRINE 1:1000: 2 AMPS
A19	1	LARYNGOSCOPE HANDLE(S) W /BATTERIES	P 21		EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
A 20	1	ET TUBES, SIZES 6.0 - 9.0mm	P 22		GLUCAGON
A 21	1	MAGIL FORCEPS	P 23		LASIX: 200mg (Furosemide)
A 22	1	STRAIGHT AND CURVED BLADES	P 24		LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pf SYRINGES @ 100mg 30day @ RT
A 23	1	SPARE BATTERIES & BULB	P 25		LIDOCAINE 2% (jelly)
A 24	1	STYLETTE, COPPER OR FLEXIBLE	P 26		LORAZEPAM (Ativan) (3 & 4 only)
A 25	1	PEDI LARYNGOSCOPE (OPTION I-LEVEL)	P 27		MIDAZOLAM (VERSED) (1, 2, 3, 4, only)
A26	1	PEDI TUBES, SIZES 2.0 - 6.0 mm	P 28		MORPHINE SULFATE: PER PROTOCOL (SCH II)
A27	1	STRAIGHT & CURVED CHILD BLADE	P 29		NARCAN (Naloxone): 4 AMP @1ml
A28	1	STRAIGHT & CURVED INFANT BLADE	P 30		NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A29	1	PNEUMATIC ANTI-SHOCK GARMENT	P 31		SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A30	1	PEDI PASG (OPTIONAL)	P 32		THIAMINE: 200mg
A31	1	SALINE FLUSH	P 33		TERBUTALINE, TETRACAINE (3 & 4 ONLY)
A32	1	NEO-SYNEPHRINE (1, 2, 3, 4 only)	P 34		VERAPAMIL: (Isoptin) 4 AMPS @ 2ml
			P 35		OTHER MEDS:





**V-2**

UNIT ID NO. A-1	PAGE 3 OF 5
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[illegible]



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - VEHICLE

2 of 1  
OEMS  
FORM  
500-21  
(8/96)

V-1

UNIT ID NO. A-1 PAGE 2 of 5

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP.	LICENSE PLATE NO.	INSPECTOR	DATE
3928	Sharborn Fire Department		5.27	FIRE 5232	DF	06/22/01
INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER						
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE					
V01	/					STAR OF LIFE CERTIFICATE - 3.19
V02	/					PAYLOAD ALLOWANCE - 3.5.2
V03	/					ELECTRICAL LOAD TEST - 3.7.6
V04	/					GROSS VEHICLE WEIGHT RATING - 3.5.3
V05	/					INSTALLED O2 SYSTEM - 3.12.1
V06	/					INSTALLED SUCTION SYSTEM - 3.12.3
V07	/					LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1
V08	/					SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11
V09	/					LITTER FASTENERS & ANCHORAGES - 3.11.7
V10	/					INTERIOR STORAGE ACCOMMODATIONS - 3.11
V11	X 21					INTERIOR SURFACES - 3.10.17 <i>BURNS on Floor NEAR REAR DOORS</i>
V12	/					PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8
V13	/					NO SMOKING/SEAT BELT SIGNS - 3.15.2
V14	/					ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13
V15	X 21					DOORS/WINDOWS - 3.10 <i>REAR hold open Device (Driver side) inoperable</i>
V16	/					BUMPERS & STEPS - 3.9.6 <i>MINOR Dent REAR Step</i>
V17	/					AMBULANCE BODY STRUCTURE - 3.10
V18	/					VEHICLE DIMENSIONS - 3.4.11
V19	/					EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2
V20	/					COLOR, PAINT & FINISH - 3.16.2
V21	/					EMBLEMS & MARKINGS - 3.16
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE					
V22	/					WHEELS / TIRES - 3.6
V23	/					CHASSIS - FRAME / BODY MOUNTING - 3.10.7
V24	/					UNDERCOATING / RUSTPROOFING - 3.17
V25	N/A					FOUR WHEEL DRIVE COMPONENTS - 3.16
V26	/					SUPENSION - 3.6.5.10
V27	/					STEERING - 3.6.6
V28	/					BRAKE SYSTEM - 3.6.5.7
V29	/					EXHAUST SYSTEM - 3.6.4.6
V30	/					POWER UNIT - 3.6.3
V31	/					AIR POLLUTION CONTROL - 3.6.4.3
V32	/					FUEL SYSTEM - 3.6.4.4
V33	/					COOLING SYSTEM - 3.6.4.5
V34	/					AUTOMATIC TRANSMISSION - 3.6.5.2
V35	/					ELECTRICAL SYSTEM - 3.7.1
V36	/					BATTERY SYSTEM - 3.7.7
V37	X 21					DRIVERS COMPARTMENT / CONTROLS - 3.9 <i>Cover Plate NEAR GAS Pedal Loose</i>
V38	/					MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11
V39	/					ENVIRONMENTAL CONTROLS - 3.13
V40	/					WARNING INDICATORS - 3.7.1.1
V41	/					BACKUP ALARM - 3.15.2
V42	/					HIGH - IDLE SPEED CONTROL - 3.7.6.1
V43	/					WINDSHIELD WIPERS / WASHERS - 3.7.4
V44	/					VALID RMV INSPECTION
V45	/					HORN - 3.7.5
V46	/					SPOILIGHT - 3.8
V47	/					OUTSIDE REARVIEW MIRRORS - 3.9.5
V48	/					SIREN / PUBLIC ADDRESS SYSTEM 3.14
V49	/					HEADLIGHTS - 3.8
V50	/					PARKING LIGHTS - 3.8
V51	/					BRAKE LIGHTS - 3.8





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

OMB  
FORM  
500-22  
(5/2000)



SERVICE NUMBER 3928	SERVICE NAME SHELBORN FIRE DEPARTMENT	AMB. CERT# 9145	EXP 5-27-01	CLASS I	VEH. TYPE T	LEVEL T	DATE 01-02-01
VEHICLE IDENTIFICATION NUMBER 11F1D1L1E14101F1X1V1N1A17151713		LICENSE PLATE NO FIRE 5232		INSPECTED BY DF	INSPECTION TYPE <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input type="checkbox"/> Renew		
LOCATION STATION #1		CHASSIS/ DATE 1/97		BODY/DATE 5/97		MILEAGE 11,526.5	
CREW NAME 1	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT	
CREW NAME 2	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	11 - CORRECTED DURING INSP. 30 - UNSANITARY - BIOHAZARD	
						20 - NOT COMPLIANT 31 - UNSANITARY - OTHER	
						21 - PARTIALLY COMPLIANT 90 - OTHER	

INSPECTION CODES	BLS SUPPLIES	INSPECTION CODES	BLS SUPPLIES
M01	(1) AMBULANCE COT	M23	(3) IRRIGATION FLUID
M02A	(1) ADULT BAG MASK VENTILATOR	M24	(1) ROLL STERILE ALUMINUM FOIL 12"x25' or adult space blanket
M02B	(1) PEDI & INFANT BAG MASK VENTILATOR	M25	(1) ROLL POLYETHYLENE FILM
M03A	(1) PORTABLE O2 RESUSC. W/ ACCESSORIES	M26	(1) ADULT BEDPAN
M03B	INSTALLED O2 SYSTEM SUPPLIES DIRT IN MAIN tank CABINET	M27	(2) MOTION SICKNESS BAGS
M04	1 PORTABLE SUCTION UNIT w/BSI equipment	M28	(2) PILLOWS W/WATERPROOF COVERS
M05	#1 FIRST AID KIT	M29	LINEN: (8) SHEETS - (4) BLANKETS - (4) TOWELS
M05A	#2 FIRST AID KIT	M30	(2) BOXES DISPOSABLE PAPER TISSUES
M06	TRACTION SPLINTS (Adult, Child) W/ACCESSORIES	M31	DISPOSABLE DRINKING CUPS
M07	PADDED BOARD SPLINTS (2 @ 3 SIZES)	M32	(4) COLD PACKS
M08	(1) FULL SPINE BOARD W/ACCESSORIES	M33	(2) INFECTION CONTROL KITS
M08A	(1) HALF SPINE BOARD or KED W/ACCESSORIES	M34	(2) GLUCOSE paste or equiv. w/wrapped tongue depressors
M09	STAIR CHAIR	M35	(1) RING CUTTER
M10	AUXILIARY STRETCHER	M36	(1) EA. SPHYGMOMANOMETER(S) ADULT, CHILD, INFANT, LARGE
M11	TRANSFER SHEET	M37	(1) STETHOSCOPE in patient compartment
M12	AIRWAYS: (6) OROPHARYNGEAL, (8) NASAL (6) PEDI NASAL	M38	(2) PLASTIC BAGS WITH TIES
M13	(24) STERILE GAUZE PADS 4"x4"	M39	CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIES
M14	(12) STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M40	SHARPS CONTAINER - min. 8" height
M15	(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M41	(2) EYE SHIELDS/FACE MASK
M16	(12) ROLLER BANDAGE 3" or 4"	M42	GLOVES - three different sizes
M17	(12) TRIANGULAR BANDAGES	M43	HAND CLEANER
M18	ADHESIVE TAPE (4) 1"x5 w/(1) hypoallergenic	M44	SEMI-AUTOMATIC DEFIBRILATOR (AED) - effective 3/2002
M19	(1) BANDAGE SHEARS	M45	LATEX FREE KIT
M20	(2) BURN SHEETS - sanitary wrapped	OTHER SUPPLIES	
M21	OBSTETRICAL KIT - w/swadlow system	Z01	AUTO-INJECTOR EPINEPHRINE
M22	POISON ANTIDOTE KIT - charcoal w/measuring device	Z02	CPR BOARD

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR: *[Signature]* DATE: 01-02-01

SIGNATURE OF PERSON IN CHARGE OF SERVICE: *[Signature]* DATE: 01-02-01

PLAN OF CORRECTION DUE: 07-02-01



9/11/00

## Review of Ambulance Inspection

**1. Partially Compliant: Latex Free Kit**

We have required latex free items for the ambulance. He recommended a bag to house all the items so it would be easy to access for everyone.

**2. Not Compliant: Set Hepa Respirators**

To be ordered with next supply order from Common Cents EMS.

**3. Not Compliant: Vacutainer tubes, needle sets and Blood labels.**

We do not perform these tasks but encouraged by the inspector to carry them incase Medical Control asks for them. Will be obtained from the hospital.

**4. Partially Compliant: Storage Space:**

This refers to our Cascade system. Inspector strongly encouraged to get rid of it and have the oxygen supplied to us. He did not like that we did not have any instructions or safety guidelines for use.

**5. Partially Compliant: Preventive Maintenance on the Defib:**

This was the biggie. We no longer have a service contract for the defib. I told him we were in process of purchasing a new one. Need to know when we can order. Priority.

**6. Partially Compliant: Checklist of Inventories:**

Need to do a better job documenting our inventories of the Ambulance. Decided that on the monthly Squad 1 drills the duty team on for that evening will show up at the station at 7:00PM and inventory the ambulance and put the paperwork in the binder. Monthly is satisfactory.



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

CEMS  
FORM  
500-22  
(5/2000)



AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

UNIT ID NO. 8-1 PAGE 705

SERVICE NUMBER <u>3928</u>	SERVICE NAME <u>Sherburne Fire</u>	AMB. CERT# <u>3928</u>	EXP <u>5-21-2000</u>	CLASS <u>TIL I</u>	VEH. TYPE/LEVEL <u>TIL I</u>	DATE <u>08.29.00</u>
VEHICLE IDENTIFICATION NUMBER <u>1FDLE401FXVHA751173</u>		LICENSE PLATE NO <u>5253</u>	INSPECTED BY <u>DF</u>	INSPECTION TYPE <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Pre-Inspect <input type="checkbox"/> Remount <input type="checkbox"/> Interim <input checked="" type="checkbox"/> Renew		

LOCATION <u>Sherburne</u>	CHASSIS/ DATE <u>FORD 5/97</u>	BODY/DATE <u>E1 S-97</u>	MILEAGE <u>11275.9</u>
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CREW NAME 1	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT 11- CORRECTED DURING INSP. 30- UNSANITARY - BIOHAZARD 20- NOT COMPLIANT 31- UNSANITARY - OTHER 21- PARTIALLY COMPLIANT 90- OTHER
CREW NAME 2	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	

INSPECTION CODES		BLS SUPPLIES	INSPECTION CODES		BLS SUPPLIES
M01	/	(1) AMBULANCE COT	M23	/	(3) IRRIGATION FLUID
M02A	/	(1) ADULT BAG MASK VENTILATOR	M24	/	(1) ROLL STERILE ALUMINUM FOIL 12"x25" or adult space blanket
M02B	/	(1) PEDI & INFANT BAG MASK VENTILATOR	M25	/	(1) ROLL POLYETHYLENE FILM
M03A	/	(1) PORTABLE O2 RESUSC. W/ ACCESSORIES	M26	/	(1) ADULT BEDPAN
M03B	/	INSTALLED O2 SYSTEM SUPPLIES	M27	/	(2) MOTION SICKNESS BAGS
M04	/	1 PORTABLE SUCTION UNIT/with BSI equipment	M28	/	(2) PILLOWS W/WATERPROOF COVERS
M05	/	#1 FIRST AID KIT	M29	/	LINEN: (8) SHEETS - (4) BLANKETS - (4) TOWELS
M05A	/	#2 FIRST AID KIT	M30	/	(2) BOXES DISPOSABLE PAPER TISSUES
M06	/	TRACTION SPLINTS (Adult, Child)W/ACCESSORIES	M31	/	DISPOSABLE DRINKING CUPS
M07	/	PADDED BOARD SPLINTS (2 @ 3 SIZES)	M32	/	(4) COLD PACKS
M08	/	(1) FULL SPINE BOARD W/ACCESSORIES	M33	/	(2) INFECTION CONTROL KITS
M08A	/	(1) HALF SPINE BOARD or KED W/ACCESSORIES	M34	/	(2) GLUCOSE paste or equiv. w/wrapped tongue depressors
M09	/	STAIR CHAIR	M35	/	(1) RING CUTTER
M10	/	AUXILIARY STRETCHER	M36	/	(1) EA. SPHYGMOMANOMETER(S) ADULT, CHILD, INFANT, LARGE
M11	/	TRANSFER SHEET	M37	/	(1) STETHOSCOPE in patient compartment
M12	/	AIRWAYS: (6) OROPHARYNGEAL, (8) NASAL (6) PEDI NASAL	M38	/	(2) PLASTIC BAGS WITH TIES
M13	/	(24) STERILE GAUZE PADS 4"x4"	M39	/	CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIES
M14	/	(12) STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M40	/	SHARPS CONTAINER - min. 8" height
M15	/	(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M41	/	(2) EYE SHIELDS/FACE MASK
M16	/	(12) ROLLER BANDAGE 3" or 4"	M42	/	GLOVES - three different sizes
M17	/	(12) TRIANGULAR BANDAGES	M43	/	HAND CLEANER
M18	/	ADHESIVE TAPE (4) 1"x5 w/(1) hypoallergenic	M44	/	NOT ADAPTATION SEMI-AUTOMATIC DEFIBRILATOR (AED) - effective 3/2002
M19	/	(1) BANDAGE SHEARS	M45	/	LATEX FREE KIT <u>PARTIAL KIT</u>
M20	/	(2) BURN SHEETS - sanitary wrapped	<b>OTHER SUPPLIES</b>		
M21	/	OBSTETRICAL KIT - w/swadler system	Z01	/	AUTO-INJECTOR EPINEPHRINE
M22	/	POISON ANTIDOTE KIT - charcoal w/measuring device	Z02	/	CPR BOARD

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR <u>[Signature]</u>	DATE <u>8/30/00</u>	SIGNATURE OF PERSON IN CHARGE OF SERVICE <u>Pamela Brown</u>	DATE <u>8/30/00</u>	PLAN OF CORRECTION DUE <u>9/13/00</u>
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MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

OSHS  
 FORM  
 500-21  
 (8/96)

**V-1**

UNIT ID NO. A-1 PAGE 2 OF 5  
 DATE 9/30/00

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT	EXP	LICENSE PLATE NO	INSPECTOR	DATE
<u>5928</u>	<u>Sherborn Fire</u>	<u>4145</u>	<u>5/27/00</u>	<u>MA 5253</u>	<u>pub</u>	<u>9/30/00</u>
INSPECTION CODES		1 - COMPLIANT		20 - NOT COMPLIANT		30 - UNSANITARY - BIOHAZARD
		11 - CORRECTED DURING INSPECTION		21 - PARTIALLY COMPLIANT		31 - UNSANITARY - OTHER
						90 - OTHER

INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE
V01	STAR OF LIFE CERTIFICATE - 3.19
V02	PAYLOAD ALLOWANCE - 3.5.2
V03	ELECTRICAL LOAD TEST - 3.7.6
V04	GROSS VEHICLE WEIGHT RATING - 3.5.3
V05	INSTALLED O2 SYSTEM - 3.12.1
V06	INSTALLED SUCTION SYSTEM - 3.12.3
V07	LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1
V08	SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11
V09	LITTER FASTENERS & ANCHORAGES - 3.11.7
V10	INTERIOR STORAGE ACCOMMODATIONS - 3.11
V11	INTERIOR SURFACES - 3.10.17
V12	PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8
V13	NO SMOKING/SEAT BELT SIGNS - 3.15.2
V14	ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13
V15	DOORS/WINDOWS - 3.10
V16	BUMPERS & STEPS - 3.9.6
V17	AMBULANCE BODY STRUCTURE - 3.10
V18	VEHICLE DIMENSIONS - 3.4.11
V19	EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2
V20	COLOR, PAINT & FINISH - 3.16.2
V21	EMBLEMS & MARKINGS - 3.16

INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE
V22	WHEELS / TIRES - 3.6
V23	CHASSIS - FRAME / BODY MOUNTING - 3.10.7
V24	UNDERCOATING / RUSTPROOFING - 3.17
V25	FOUR WHEEL DRIVE COMPONENTS - 3.16
V26	SUPENSION - 3.6.5.10
V27	STEERING - 3.6.6
V28	BRAKE SYSTEM - 3.6.5.7
V29	EXHAUST SYSTEM - 3.6.4.6
V30	POWER UNIT - 3.6.3
V31	AIR POLLUTION CONTROL - 3.6.4.3
V32	FUEL SYSTEM - 3.6.4.4
V33	COOLING SYSTEM - 3.6.4.5
V34	AUTOMATIC TRANSMISSION - 3.6.5.2
V35	ELECTRICAL SYSTEM - 3.7.1
V36	BATTERY SYSTEM - 3.7.7
V37	DRIVERS COMPARTMENT / CONTROLS - 3.9
V38	MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11
V39	ENVIRONMENTAL CONTROLS - 3.13
V40	WARNING INDICATORS - 3.7.1.1
V41	BACKUP ALARM - 3.15.2
V42	HIGH - IDLE SPEED CONTROL - 3.7.6.1
V43	WINDSHIELD WIPERS / WASHERS - 3.7.4
V44	VALID RMV INSPECTION
V45	HORN - 3.7.5
V46	SPOLIGHT - 3.8
V47	OUTSIDE REARVIEW MIRRORS - 3.9.5
V48	SIREN / PUBLIC ADDRESS SYSTEM 3.14
V49	HEADLIGHTS - 3.8
V50	PARKING LIGHTS - 3.8
V51	BRAKE LIGHTS - 3.8



**OEMS FORM  
500-21  
(3/2000)**

V-2

UNIT ID NO. A-	PAGE 3 OF 5
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SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP	LICENSE PLATE NO	INSPECTOR	DATE	
3928	Sharon Fire	4/15	5/02	Am 5253	ALB	08.3.00	
INSPECTION CODES		1 - COMPLIANT		20 - NOT COMPLIANT		30 - UNSANITARY - BIOHAZARD	
		11 - CORRECTED DURING INSPECTION		21 - PARTIALLY COMPLIANT		31 - UNSANITARY - OTHER	
INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE					
V52	/	BACKUP LIGHTS - 3.8					
V53	/	TURN SIGNALS - 3.8					
V54	/	SIDEMARKER LIGHTS FLASH W /TURN SIGNALS) - 3.8					
V55	/	LICENSE PLATE LAMP (S) - 3.8					
V56	/	HAZARD WARNING LIGHTS - 3.8					
V57	/	CLEARANCE LAMPS (OPTIONAL) - 3.8					
V58	/	EMERGENCY LIGHTING - 3.8.2					
V59	/	FLOOD & LOAD LIGHTS - 3.8					
V60	/	VEHICLE PERFORMANCE - 3.4					
V61	/	MANUALS, & HANDBOOK OF INSTRUCTION - 3.2					
V62	/	WORKMANSHIP - 3.23					
VEHICLE EQUIPMENT							
E01	/	EQUIPMENT TO GAIN ACCESS					
E03	/	MAPS					
E04	/	FIRE EXTINGUISHERS, 1 IN PT. COMPT.					
E05	/	(2) SIX VOLT HANDLIGHTS					
E06	/	(2) CHOCK BLOCKS					
E07	/	(6) DOT TRIANGULAR REFLECTORS OR EQUIV.					
E08	/	HAZARDOUS MATERIAL GUIDEBOOKS					
E09	/	BINOCULARS - 7x35 min.					
E10	/	(25) TRIAGE TAGS					
E11	/	PROTECTIVE EQUIP-MENT (anticipated exposures) (x2)					
E 12	/	(1) REFLECTIVE GARMENT OR Equiv. per crew member					
E 13	X 10	(1) SET NEPA RESPIRATORS OR EQUIV					
INSPECTION CODES		VEHICLE CONT					
R01	/	TWO WAY RADIO DISPATCH					
R02	/	TWO WAY RADIO HOSPITAL					
R03	/	PORTABLE HOSPITAL RADIO (ALS)					
OTHER DEFICIENCIES							
NOTICE TO LICENSEE							
<input type="checkbox"/> <b>AMBULANCE OUT OF SERVICE</b> <b>UNTIL THE FOLLOWING SERIOUS DEFICIENCIES ARE CORRECTED</b>							
NSD #							



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

 OEMS FORM  
 500-23 (5/91) **A**

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Shirborn Fire</b>	AMBULANCE CERT <b>9145</b>	LICENSE PLATE NO <b>MC 5253</b>	UNIT ID NO <b>A-1</b>	INSPECTOR <b>Rob</b>	DATE <b>08/30/06</b>
INSPECTION CODES 1 = COMPLIANT 11 = CORRECTED DURING INSPECTION		20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT		30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER		90 = OTHER

INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES		PARAMEDIC SUPPLIES
E 01B	1	PORTABLE MEDICAL RADIO	P 01		DEFIBRILATOR / CARDIAC MONITOR
			P 02		DEFIBRILATOR ACCESSORIES
A 01	1	IV THERAPY EQUIPMENT	P 03		AMINOPHYLLINE: 2 AMP @ 10 OR 20ml
A 02	1	CATHETERS, SIZES 14G - 25G	P 04		ARAMINE: 2 VIALS @ 10ml
A 03	1	ADMINISTRATION SETS, MACRO / MICRO	P 05		ATROPINE SULFATE: 4 mg
A 04	1	VENOUS TOURNIQUETS	P 06		BRETYLIUM TOSALATE: 50 mg/ml / 4 Amp @ 10ml
A 05	1	PADDED ARM BOARDS	P 07		CALCIUM CHLORIDE: 2gm
A 06	1	1" ADHESIVE TAPE OR EQUAL	P 08		DECADRON / HEXADOL: 20mg
A 07	1	ALCOHOL PREPS / ANTISEPTIC SWABS	P 09		D5W: 4 BAGS ANY SIZE
A 08	1	FLUIDS IN UNBREAKABLE CONTAINERS	P 10		D50W: 4 VIALS
A 09	1	D5W / LACTATED RINGERS / NS 9%	P 11		DIAZEPAM / VALIUM: PER PROTOCOL
A 10	1	NEEDLES, 18G - 21G, 1/2" - 2"	P 12		BENADRYL: 200mg
A 11	1	SYRINGES, 30cc & 50cc	P 13		DOBUTAMINE: 2 VIALS @ 20ml
A 12	20	VACUTAINER TUBES & NEEDLE SETS	P 14		EPINEPHRINE 1:1000: 2 AMPS
A 13	20	BLOOD LABELS	P 15		EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
A 14	1	EOA / EGTA / ET	P 16		LASIX: 200mg
A 15	1	30cc SYRINGE (EOA / EGTA)	P 17		DOPAMINE: 800mg
A 16	1	HEMOSTAT (EOA / EGTA)	P 18		ISUPREL: 4 VIALS
A 17	1	WATER SOLUBLE LUBRICANT (EOA / EGTA)	P 19		LACTATED RINGERS: 4 BAGS @ 1000ml
A 18	1	TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 20		LEVOPHED: 4 AMPS
A 19	1	LARYNGOSCOPE HANDLES(S) W/BATTERIES	P 21		LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pf SYRINGES @ 100mg
A 20	1	ET TUBES, SIZES 6.0 - 9.0mm	P 22		MANNITOL: PER PROTOCOL
A 21	1	MAGIL FORCEPS	P 23		DEMEROL: PER PROTOCOL (SCH II)
A 22	1	STRAIGHT AND CURVED BLADES	P 24		MORPHINE SULFATE: PER PROTOCOL (SCH II)
A 23	1	SPARE BATTERIES & BULB	P 25		NARCAN: 4 AMP @ 1ml
A 24	1	STYLETTE, COPPER OR FLEXIBLE	P 26		NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A 25	1	PEDI LARYNGOSCOPE (OPTION I-LEVEL)	P 27		NORMAL SALINE: 4 BAGS, ANY SIZE (250, 500, 1,000 ml)
A 26	1	PEDI TUBES, SIZES 2.0 - 6.0mm	P 28		OXYTOCIN / PITOCIN: 40 UNITS
A 27	1	STRAIGHT & CURVED CHILD BLADE	P 29		PROCAINAMIDE: 500mg
A 28	1	STRAIGHT & CURVED INFANT BLADE	P 30		INDERAL: 5 AMPS @ 1ml
A 29	1	PNEUMATIC ANTI-SHOCK GARMENT	P 31		SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A 30		PEDI PASG (OPTIONAL)	P 32		THIAMINE: 200mg
			P 33		VERAPAMIL: 4 AMPS @ 2ml
			P 34		ADDITIONAL MEDICATIONS PER REGIONAL PROTOCOL





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - SERVICE

OBMS  
 FORM  
 500-24  
 (8/96)

**S**

PAGE 5 OF 5

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Shirborn Fire Dept</b>	LICENSEE <b>Town of Shirborn</b>	DATE <b>08.30.00</b>
ADDRESS <b>22 North Main St</b>		BUSINESS PHONE <b>508-651-7865</b>	INSPECTOR <b>Jon Devine</b>
CITY/STATE/ZIP <b>Shirborn MA 01770</b>		MANAGER NAME <b>Ken Buckler Chief</b>	OFFICE USE ONLY <b>Jon Devine</b>

INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER  
 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER

INSPECTION CODES	SERVICE OPERATIONS 170.200 ET SEQ
S 01	LICENSURE
S 02	CERTIFICATION OF VEHICLES & PERSONNEL
S 03	STAFFING <b>7/19 7als</b>
S 04	INSURANCE
S 05	ADVERTISING
S 06	INCIDENT OR ACCIDENT REPORTS
S 07	DISPLAY OF LICENSE
S 08	RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT
S 09	PUBLIC ACCESS <b>Q 12</b>
S 10	DISPATCH COMMUNICATIONS
S 11	MEDICAL COMMUNICATIONS
S 12	AVAILABILITY & BACKUP
S 13	SPECIAL REQUIREMENTS TO OPERATE CLASS V
S 14	HEATED GARAGE
S 15	STORAGE SPACE <b>8 instructions on Safety Equipment &amp; Loc</b>
S 16	SUPPLIES <b>O2 fill site</b>
S 17	NON-DISCRIMINATION
S 18	AFFILIATION AGREEMENT
S 19	ALS PROCEDURES & POLICIES
S 20	REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995 <b>MA 0146236 12/31/02</b>

INSPECTION CODES	RECORDS 170.240
S 21	PERSONNEL
S 22	PREVENTIVE MAINTENANCE <b>Q 3 &amp; bio medically certified</b>
S 23	VEHICLE REGISTRATION
S 24	FAA CERTIFICATION (CLASS IV)
S 25	LICENSES FOR PILOTS (CLASS IV)
S 26	FCCLICENSES
S 27	TRIP RECORDS
S 28	TRIP RECORDS LEFT @ RECIEVING FACILITY

INSPECTION CODES	WRITTEN POLICIES & PROCEDURES 170.235
S 27	CERTIFICATION & RECERT OF PERSONNEL
S 28	RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT
S 29	DELIVERY OF PT. TO NEAREST APP. FACILITY
S 30	NON-DISCRIMINATION
S 31	BACKUP SERVICES
S 32	USE OF BACKUP SERVICES
S 33	DISPATCH
S 34	COMMUNICATIONS
S 35	STOCKING SUPPLIES
S 36	SANITARY PRACTICES
S 37	USE OF LIGHTS & WARNING SIGNALS
S 38	STAFFING OF AMBULANCES
S 39	CONDUCT OF PERSONNEL
S 40	MECHANICAL FAILURES
S 41	INSPECTION AUTHORITIES
S 42	TRANSPORT OF DEAD BODIES
S 43	PARENT RIGHTS
S 44	PATIENT RESTRAINTS
S 45	DISPOSAL OF HAZARDOUS WASTE
S 46	MANDATED REPORTING
S 47	INFECTION CONTROL PROCEDURES
S 48	DESIGNATED INFECTION CONTROL OFFICER
S 49	TRIP RECORDS LEFT @ RECIEVING FACILITIES
S 50	INFECTION CONTROL PROCEDURES
S 51	MAINTENANCE OF DEFIBRILLATOR <b>Q 21</b>
S 52	CONTROL & INSPECTION OF EPI-PENS <b>Q 21</b>

**Checklist & Routinely kept on file since move.**





**Massachusetts Department of Public Health  
Office of Emergency Medical Services  
Ambulance Regulation Program  
PLAN OF CORRECTION**



Service Number  
**3191218**

License Expiration Date  
**5/27/00**

Insp.  
**DF + PB**

RESPONSE DUE BY:

Service Name **Sherborn Fire Dept**

**VEHICLE INFORMATION (If Applicable)**

License Plate Number **FIRE 5253** Is this vehicle a(n)   Addition     Replacement   ☒   Renewal    
Ambulance Class **III** Vehicle Unit Id **A1**

Vehicle Identification Number

**1FDLE40FXVHA75173**

Page	Citation	Providers Plan of Correction (provide details of corrective action that satisfies reported deficiencies) (for page and citation number refer to inspection report form)	Completion Date
1	M45	Latex Free Kit Complete	9/17/00
45	<del>M45</del> 522	Defib - new one ordered	
3	E13	Hepa Respirators - ordered	9/17
4	A12 + 13	Vacutainer tubes + needle sets Blood labels obtained from hospital	9/17
5	S15	Cascade System - decision to be made when new station complete *	9/17
5	S27	New SOG for inventorying A1. beg. of monthly squad drill it will be inventoried by duty team & report filed in binder  * until then, safety guidelines & equip. will be available.	9/17

Licensee representative's signature

*Janella Drouse*

Title

*LT.*

Date

*9/11/00*



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - SERVICE

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S

PAGE 5 OF 5

SERVICE NUMBER <b>3778</b>	SERVICE NAME <b>Shelborn Fire Dept</b>	LICENSEE <b>Town of Shelborn</b>	DATE <b>050499</b>
ADDRESS <b>22 North Main Street</b>		BUSINESS PHONE <b>508-651-7869</b>	INSPECTOR <b>POB</b>
CITY/STATE/ZIP <b>Shelborn MA 01770</b>		MANAGER NAME <b>Rossell Buckley - Acting</b>	
INSPECTION CODES: 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER			

INSPECTION CODES		SERVICE OPERATIONS 170.200 ET SEQ	INSPECTION CODES		WRITTEN POLICIES & PROCEDURES 170.235
S 01	1	LICENSURE	S 27	1	CERTIFICATION & RECERT OF PERSONNEL
S 02	1	CERTIFICATION OF VEHICLES & PERSONNEL	S 28	1	RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT
S 03	1	STAFFING <b>ALS</b>	S 29	1	DELIVERY OF PT. TO NEAREST APP. FACILITY
S 04	1	INSURANCE	S 30	1	NON-DISCRIMINATION
S 05	1	ADVERTISING	S 31	1	BACKUP SERVICES
S 06	1	INCIDENT OR ACCIDENT REPORTS	S 32	1	USE OF BACKUP SERVICES
S 07	1	DISPLAY OF LICENSE	S 33	1	DISPATCH
S 08	1	RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT	S 34	1	COMMUNICATIONS
S 09	1	PUBLIC ACCESS <b>CA P.O.</b>	S 35	1	STOCKING SUPPLIES
S 10	1	DISPATCH COMMUNICATIONS	S 36	21	SANITARY PRACTICES <b>Expanded &amp; breaks out into policy</b>
S 11	1	MEDICAL COMMUNICATIONS	S 37	1	USE OF LIGHTS & WARNING SIGNALS
S 12	1	AVAILABILITY & BACKUP	S 38	1	STAFFING OF AMBULANCES
S 13	1	SPECIAL REQUIREMENTS TO OPERATE CLASS V	S 39	1	CONDUCT OF PERSONNEL
S 14	1	HEATED GARAGE	S 40	1	MECHANICAL FAILURES
S 15	1	STORAGE SPACE	S 41	1	INSPECTION AUTHORITIES
S 16	1	SUPPLIES	S 42	1	TRANSPORT OF DEAD BODIES
S 17	1	NON-DISCRIMINATION	S 43	1	PARENT RIGHTS
S 18	1	AFFILIATION AGREEMENT	S 44	1	PATIENT RESTRAINTS
S 19	21	ALS PROCEDURES & POLICIES <b>Policy for ALS Care &amp; written</b>	S 45	1	DISPOSAL OF HAZARDOUS WASTE
S 20	1	REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995 <b>MA 0146236 12/31/99</b>	S 46	1	MANDATED REPORTING
<b>RECORDS 170.240</b>			S 47	1	INFECTION CONTROL PROCEDURES
S 21	1	PERSONNEL	S 48	1	DESIGNATED INFECTION CONTROL OFFICER
S 22	21	PREVENTIVE MAINTENANCE <b>See notes</b>	S 49	1	TRIP RECORDS LEFT @ RECEIVING FACILITIES
S 23	1	VEHICLE REGISTRATION	S 50	1	INFECTION CONTROL PROCEDURES
S 24	1	FAA CERTIFICATION (CLASS IV)	S 51	1	MAINTENANCE OF DEFIBRILLATOR
S 25	1	LICENSES FOR PILOTS (CLASS IV)	S 52	1	CONTROL & INSPECTION OF EPI-PENS
S 26	1	FCC LICENSES		*	<b>Remove older outdated policies from binder</b>
S 27	1	TRIP RECORDS		*	<b>Recommend TB testing</b>
S 28	1	TRIP RECORDS LEFT @ RECEIVING FACILITY			
S 29	21	ALS Care Team & development			
		Equipment Supply checks & documented in one year			





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

OEMS FORM  
 500-23 (5/91)

UNIT ID NO PAGE 4 OF 5

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Sharon Fire Dept</b>	AMBULANCE CERT <b>8308</b>	LICENSE PLATE NO <b>PL 3253</b>	UNIT ID NO <b>A7</b>	INSPECTOR <b>AB</b>	DATE <b>05/04/98</b>
INSPECTION CODES 1 = COMPLIANT 11 = CORRECTED DURING INSPECTION		20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT		30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER		90 = OTHER

INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES		PARAMEDIC SUPPLIES
E 01B	/	PORTABLE MEDICAL RADIO	P 01	/	DEFIBRILATOR / CARDIAC MONITOR
			P 02	/	DEFIBRILATOR ACCESSORIES
A 01	/	IV THERAPY EQUIPMENT	P 03	/	AMINOPHYLLINE: 2 AMP @ 10 OR 20ml
A 02	/	CATHETERS, SIZES 14G - 25G	P 04	/	ARAMINE: 2 VIALS @ 10ml
A 03	/	ADMINISTRATION SETS, MACRO / MICRO	P 05	/	ATROPINE SULFATE: 4 mg
A 04	/	VENOUS Tourniquets	P 06	/	BRETYLIUM TOSALATE: 50 mg/ml: 4 Amp @ 10ml
A 05	/	PADDED ARM BOARDS	P 07	/	CALCIUM CHLORIDE: 2gm
A 06	/	1" ADHESIVE TAPE OR EQUAL	P 08	/	DECADRON / HEXADOL: 20mg
A 07	/	ALCOHOL PREPS / ANTISEPTIC SWABS	P 09	/	D5W: 4 BAGS ANY SIZE
A 08	/	FLUIDS IN UNBREAKABLE CONTAINERS	P 10	/	D50W: 4 VIALS
A 09	/	D5W / LACTATED RINGERS / NS 9%	P 11	/	DIAZEPAM / VALIUM: PER PROTOCOL
A 10	/	NEEDLES, 18G - 21G, 1/2" - 2"	P 12	/	BENADRYL: 200mg
A 11	/	SYRINGES, 30cc & 50cc	P 13	/	DOBUTAMINE: 2 VIALS @ 20ml
A 12	/	VACUTAINER TUBES & NEEDLE SETS	P 14	/	EPINEPHRINE 1:1000: 2 AMPS
A 13	/	BLOOD LABELS	P 15	/	EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
A 14	/	EOA / EGTA / ET	P 16	/	LASIX: 200mg
A 15	/	30cc SYRINGE (EOA / EGTA)	P 17	/	DOPAMINE: 800mg
A 16	/	HEMOSTAT (EOA / EGTA)	P 18	/	ISUPREL: 4 VIALS
A 17	/	WATER SOLUBLE LUBRICANT (EOA / EGTA)	P 19	/	LACTATED RINGERS: 4 BAGS @ 1000ml
A 18	/	TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 20	/	LEVOPHED: 4 AMPS
A 19	/	LARYNGOSCOPE HANDLES(S) W/BATTERIES	P 21	/	LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pl SYRINGES @ 100mg
A 20	/	ET TUBES, SIZES 6.0 - 9.0mm	P 22	/	MANNITOL: PER PROTOCOL
A 21	/	MAGIL FORCEPS	P 23	/	DEMEROL: PER PROTOCOL (SCH II)
A 22	/	STRAIGHT AND CURVED BLADES	P 24	/	MORPHINE SULFATE: PER PROTOCOL (SCH II)
A 23	/	SPARE BATTERIES & BULB	P 25	/	NARCAN: 4 AMP @ 1ml
A 24	/	STYLETTE, COPPER OR FLEXIBLE	P 26	/	NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A 25	/	PEDI LARYNGOSCOPE (OPTION I-LEVEL)	P 27	/	NORMAL SALINE: 4 BAGS, ANY SIZE (250, 500, 1,000 ml)
A 26	/	PEDI TUBES, SIZES 2.0 - 6.0mm	P 28	/	OXYTOCIN / PITOCIN: 40 UNITS
A 27	/	STRAIGHT & CURVED CHILD BLADE	P 29	/	PROCAINAMIDE: 500mg
A 28	/	STRAIGHT & CURVED INFANT BLADE	P 30	/	INDERAL: 5 AMPS @ 1ml
A 29	/	PNEUMATIC ANTI-SHOCK GARMENT	P 31	/	SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A 30	/	PEDI PASG (OPTIONAL)	P 32	/	THIAMINE: 200mg
			P 33	/	VERAPAMIL: 4 AMPS @ 2ml
			P 34	/	ADDITIONAL MEDICATIONS PER REGIONAL PROTOCOL





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
FORM  
500-21  
(8/96)

V-2

UNIT NO. 177 PAGE 2 OF 2  
DATE 05.04.07

SERVICE NUMBER 3928	SERVICE NAME Newborn Fire	AMBULANCE CERT 0528	EXP 3/99	LICENSE PLATE NO AN5253	INSPECTOR RFB	DATE 05.04.07	
INSPECTION CODES		1 - COMPLIANT 11 - CORRECTED DURING INSPECTION		20 - NOT COMPLIANT 21 - PARTIALLY COMPLIANT		30 - UNSANITARY - BIOHAZARD 31 - UNSANITARY - OTHER 90 - OTHER	
INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE		INSPECTION CODES		VEHICLE COMMENTS	
V52	/	BACKUP LIGHTS - 3.8					
V53	/	TURN SIGNALS - 3.8					
V54	/	SIDEMARKER LIGHTS FLASH W /TURN SIGNALS) - 3.8					
V55	/	LICENSE PLATE LAMP (S) - 3.8					
V56	/	HAZARD WARNING LIGHTS - 3.8					
V57	/	CLEARANCE LAMPS (OPTIONAL) - 3.8					
V58	/	EMERGENCY LIGHTING - 3.8.2					
V59	/	FLOOD & LOAD LIGHTS - 3.8					
V60	/	VEHICLE PERFORMANCE - 3.4					
V61	/	MANUALS, & HANDBOOK OF INSTRUCTION - 3.2					
V62	/	WORKMANSHIP - 3.23					
		VEHICLE EQUIPMENT					
E01	/	EQUIPMENT TO GAIN ACCESS					
E03	/	MAPS					
E04	/	FIRE EXTINGUISHERS, 1 IN PT. COMPT.					
E05	/	(2) SIX VOLT HANDLIGHTS					
E06	/	1 CHOCK BLOCK					
E07	/	(6) 30 MIN. ROAD FLARES OR (6) DOT REFLECTORS					
E08	/	HAZARDOUS MATERIAL GUIDEBOOKS					
E09	/	BINOCULARS					
E10	/	TRIAGE TAGS					
E11	/	PROTECTIVE EQUIPMENT (anticipated exposures) (x2)					
R01	/	TWO WAY RADIO DISPATCH					
R02	/	TWO WAY RADIO HOSPITAL					
R03	/	PORTABLE HOSPITAL RADIO (ALS)					



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
FORM  
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(8/96)

V-1

UNIT ID NO. A-1 PAGE 2 OF 2  
DATE 05.04.99

SERVICE NUMBER <u>3928</u>	SERVICE NAME <u>Shearborn Fire</u>	AMBULANCE CERT. NO. <u>8508</u>	EXP. DATE <u>3/3/99</u>	LICENSE PLATE NO. <u>6E 5253</u>	INSPECTOR <u>[Signature]</u>	DATE <u>05.04.99</u>
INSPECTION CODES		1 - COMPLIANT 11 - CORRECTED DURING INSPECTION		20 - NOT COMPLIANT 21 - PARTIALLY COMPLIANT		30 - UNSANITARY - BIOHAZARD 31 - UNSANITARY - OTHER
INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE				
V01	/	STAR OF LIFE CERTIFICATE - 3.19				
V02	/	PAYLOAD ALLOWANCE - 3.5.2				
V03	/	ELECTRICAL LOAD TEST - 3.7.6				
V04	/	GROSS VEHICLE WEIGHT RATING - 3.5.3				
V05	/	INSTALLED O2 SYSTEM - 3.12.1				
V06	/	INSTALLED SUCTION SYSTEM - 3.12.3				
V07	/	LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1				
V08	/	SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11				
V09	/	LITTER FASTENERS & ANCHORAGES - 3.11.7				
V10	/	INTERIOR STORAGE ACCOMMODATIONS - 3.11				
V11	/	INTERIOR SURFACES - 3.10.17				
V12	/	PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8				
V13	/	NO SMOKING/SEAT BELT SIGNS - 3.15.2				
V14	/	ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13				
V15	/	DOORS/WINDOWS - 3.10				
V16	/	BUMPERS & STEPS - 3.9.6				
V17	/	AMBULANCE BODY STRUCTURE - 3.10				
V18	/	VEHICLE DIMENSIONS - 3.4.11				
V19	/	EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2				
V20	/	COLOR, PAINT & FINISH - 3.16.2				
V21	/	EMBLEMS & MARKINGS - 3.16				
V22	/	WHEELS / TIRES - 3.6				
V23	/	CHASSIS - FRAME / BODY MOUNTING - 3.10.7				
V24	/	UNDERCOATING / RUSTPROOFING - 3.17				
V25	/	FOUR WHEEL DRIVE COMPONENTS - 3.16				
V26	/	SUSPENSION - 3.6.5.10				
V27	/	STEERING - 3.6.6				
V28	/	BRAKE SYSTEM - 3.6.5.7				
V29	/	EXHAUST SYSTEM - 3.6.4.6				
V30	/	POWER UNIT - 3.6.3				
V31	/	AIR POLLUTION CONTROL - 3.6.4.3				
V32	/	FUEL SYSTEM - 3.6.4.4				
V33	/	COOLING SYSTEM - 3.6.4.5				
V34	/	AUTOMATIC TRANSMISSION - 3.6.5.2				
V35	/	ELECTRICAL SYSTEM - 3.7.1				
V36	/	BATTERY SYSTEM - 3.7.7				
V37	/	DRIVERS COMPARTMENT / CONTROLS - 3.9				
V38	/	MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11				
V39	/	ENVIRONMENTAL CONTROLS - 3.13				
V40	/	WARNING INDICATORS - 3.7.1.1				
V41	/	BACKUP ALARM - 3.15.2				
V42	/	HIGH - IDLE SPEED CONTROL - 3.7.6.1				
V43	/	WINDSHIELD WIPERS / WASHERS - 3.7.4				
V44	/	VALID RMV INSPECTION				
V45	/	HORN - 3.7.5				
V46	/	SPOLIGHT - 3.8				
V47	/	OUTSIDE REARVIEW MIRRORS - 3.9.5				
V48	/	SIREN / PUBLIC ADDRESS SYSTEM 3.14				
V49	/	HEADLIGHTS - 3.8				
V50	/	PARKING LIGHTS - 3.8				
V51	/	BRAKE LIGHTS - 3.8				





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

OBMS  
FORM  
500-22  
(8/96)



AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Shirborn Fire Dept</b>	AMB. CERT <b>8508</b>	EXP <b>3/2/99</b>	CLASS <b>I</b>	VEH. TYPE <b>112</b>	LEVEL <b>1</b>	DATE <b>05.04.99</b>	UNIT ID NO <b>1-1</b>	PAGE <b>1 of 5</b>
VEHICLE IDENTIFICATION NUMBER <b>1F0P L E 4 0 F X V H A 7 5 1 7 3</b>		LICENSE PLATE NO <b>PLA 5253</b>		INSPECTED BY <b>PLA</b>		INSPECTION TYPE <input type="checkbox"/> Pre-Inspect <input type="checkbox"/> Remount <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input checked="" type="checkbox"/> Renew			
LOCATION <b>Ford 1/97</b>		CHASSIS DATE <b>E-CHE 5/97</b>		BODY DATE <b>5/97</b>		MILEAGE <b>8296</b>			
CREW NAME 1		EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.		1 - COMPLIANT	
CREW NAME 2		EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.		INSPECTION CODES	
								11- CORRECTED DURING INSP. 30- UNSANITARY - BIOHAZARD	
								20- NOT COMPLIANT 31- UNSANITARY - OTHER	
								21- PARTIALLY COMPLIANT 90- OTHER	

INSPECTION CODES		BLS SUPPLIES	INSPECTION CODES		BLS SUPPLIES
M01	/	1 AMBULANCE COT	M 23	/	(2) IRRIGATION FLUID
M02A	/	1 ADULT BAG MASK VENTILATOR	M24	/	1 ROLL STERILE ALUMINUM FOIL
M02B	/	1 PEDI BAG MASK VENTILATOR	M25	/	1 ROLL POLYETHYLENE FILM
M03A	/	1 PORTABLE O2 RESUSC. W/ ACCESSORIES	M26	/	1 ADULT BEDPAN
M03B	/	INSTALLED O2 SYSTEM SUPPLIES	M27	/	MOTION SICKNESS BAGS (2)
M04	/	1 PORTABLE SUCTION UNIT	M 28	/	2 PILLOWS W/WATERPROOF COVERS
M05	/	#1 FIRST AID KIT	M 29	/	8 SHEETS
M05A	/	#2 FIRST AID KIT	M 30	/	4 BLANKETS
M06	/	TRACTION SPLINTS (Adult, Child) W/ACCESSORIES	M 31	/	4 TOWELS
M07	/	PADDED BOARD SPLINTS (2 @ 2 SIZES)	M 32	/	2 BOXES DISPOSABLE PAPER TISSUES
M08	/	1 FULL SPINE BOARD W/ACCESSORIES	M 33	/	2 PACKAGES OF DISPOSABLE DRINKING CUPS
M08A	/	1 HALF SPINE BOARD W/ACCESSORIES	M 34	/	4 COLD PACKS
M09	/	STAIR CHAIR	M 35	/	INFECTION CONTROL KIT (2 EMT'S)
M10	/	AUXILIARY STRETCHER	M 36	/	IMMOBILIZATION BAGS (2) 6"x9"
M11	/	TRANSFER SHEET	M 37	/	1 RING CUTTER
M12	/	WRAPPED OROPHARYNGEAL, NASAL AIRWAYS	M 38	/	1 CHILD SIZE SPHYGMOMANOMETER
M13	/	(24) STERILE GAUZE PADS 4"x4"	M 39	/	1 LARGE SPHYGMOMANOMETER (Large adult or Thigh cuff)
M14	/	12 STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M 40	/	(2) PLASTIC BAGS WITH TIES
M15	/	(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M 41	/	CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIES
M16	/	(12) ROLLER BANDAGE 3" or 4"	M 42	/	SHARPS CONTAINER
M17	/	(12) TRIANGULAR BANDAGES	M 43	/	(2) EYE SHIELDS/FACE MASK
M18	/	ADHESIVE TAPE (1", 2" @ 2 ea)	M 44	/	GLOVES
M19	/	1 BANDAGE SHEARS	M 45	/	HAND CLEANER
M20	/	(2) BURN SHEETS	OTHER SUPPLIES		
M21	/	OBSTETRICAL KIT	Z 01	/	PASG
M22	/	POISON ANTIDOTE KIT	Z 02	/	SEMI-AUTOMATIC DEFIBRILATOR
			Z 03	/	AUTO-INJECTORABLE EPINEPHRINE

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR: *[Signature]* DATE: *5/4/99* SIGNATURE OF PERSON IN CHARGE OF SERVICE: *Pamela Dwyer* DATE: *5/4/99* PLAN OF CORRECTION DUE: *5/18/99*





**Massachusetts Department of Public Health  
Office of Emergency Medical Services  
Ambulance Regulation Program  
PLAN OF CORRECTION**



Service Number <b>319128</b>	License Expiration Date <b>3/31/99</b>	Insp. <b>PB</b>	RESPONSE DUE BY:
---------------------------------	---	--------------------	------------------

Service Name <b>Sherborn Fire Dept.</b>
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VEHICLE INFORMATION (If Applicable)																				
License Plate Number <b>FIRE 5253</b>		Is this vehicle a(n) <u>      </u> Addition <u>      </u> Replacement <input checked="" type="checkbox"/> Renewal																		
Ambulance Class <b>I</b>		Vehicle Unit Id <b>A1</b>																		
Vehicle Identification Number		<table border="1"> <tr> <td>1</td><td>F</td><td>D</td><td>L</td><td>E</td><td>4</td><td>O</td><td>F</td><td>X</td><td>V</td><td>H</td><td>A</td><td>7</td><td>5</td><td>1</td><td>7</td><td>3</td> </tr> </table>		1	F	D	L	E	4	O	F	X	V	H	A	7	5	1	7	3
1	F	D	L	E	4	O	F	X	V	H	A	7	5	1	7	3				
Page	Citation	Providers Plan of Correction (provide details of corrective action that satisfies reported deficiencies) (for page and citation number refer to inspection report form)	Completion Date																	
S	S19	Update Policies Update to current forms included ALS checklist on inv. forms Expanded Policy  *will send in updates when completed.	June 1999																	
S	S22																			
S	S22																			
S	S36																			
Licensee representative's signature <b>Pamela Dowse</b>		Title <b>Lt.</b>	Date <b>5/4/99</b>																	



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

OBMS  
FORM  
500-22  
(8/96)



AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Shirborn Fire Dept</b>	AMB. CERT# <b>8224</b>	EXP <b>2/25/98</b>	CLASS <b>I</b>	VEH. TYPE <b>TL</b>	LEVEL <b>MSI</b>	DATE <b>03.09.98</b>
VEHICLE IDENTIFICATION NUMBER <b>1F0LE40KXV4A751173</b>		LICENSE PLATE NO <b>MAE 5053</b>	INSPECTED BY <b>PS</b>	INSPECTION TYPE <input type="checkbox"/> Pre-Inspect <input type="checkbox"/> Remount <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input checked="" type="checkbox"/> Renew			
LOCATION <b>Forde 1/97</b>		CHASSIS/DATE <b>E-1 5/97</b>	BODY/DATE <b>1 412 219</b>		MILEAGE		
CREW NAME 1	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT	
CREW NAME 2	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	INSPECTION CODES	
						11- CORRECTED DURING INSP. 30- UNSANITARY - BIOHAZARD	
						20- NOT COMPLIANT 31- UNSANITARY - OTHER	
						21- PARTIALLY COMPLIANT 90- OTHER	

INSPECTION CODES		BLS SUPPLIES	INSPECTION CODES		BLS SUPPLIES
M01	/	1 AMBULANCE COT	M 23	/	(2) IRRIGATION FLUID
M02A	/	1 ADULT BAG MASK VENTILATOR	M24	/	1 ROLL STERILE ALUMINUM FOIL
M02E	/	1 PEDI BAG MASK VENTILATOR	M25	/	1 ROLL POLYETHYLENE FILM
M03A	/	1 PORTABLE O2 RESUSC. W/ ACCESSORIES	M26	/	1 ADULT BEDPAN
M03E	/	INSTALLED O2 SYSTEM SUPPLIES	M27	/	MOTION SICKNESS BAGS (2)
M04	/	1 PORTABLE SUCTION UNIT	M 28	/	2 PILLOWS W/WATERPROOF COVERS
M05	/	#1 FIRST AID KIT	M 29	/	8 SHEETS
M05A	/	#2 FIRST AID KIT	M 30	/	4 BLANKETS
M06	/	TRACTION SPLINTS (Adult, Child)W/ACCESSORIES	M 31	/	4 TOWELS
M07	/	PADDED BOARD SPLINTS (2 @ 2 SIZES)	M 32	/	2 BOXES DISPOSABLE PAPER TISSUES
M08	/	1 FULL SPINE BOARD W/ACCESSORIES	M 33	/	2 PACKAGES OF DISPOSABLE DRINKING CUPS
M08A	/	1 HALF SPINE BOARD W/ACCESSORIES	M 34	/	4 COLD PACKS
M09	/	STAIR CHAIR	M 35	/	INFECTION CONTROL KIT (2 EMT'S)
M10	/	AUXILIARY STRETCHER	M 36	/	IMMOBILIZATION BAGS (2) 6"x9"
M11	/	TRANSFER SHEET	M 37	/	1 RING CUTTER
M12	/	WRAPPED OROPHARYNGEAL, NASAL AIRWAYS	M 38	/	1 CHILD SIZE SPHYGMOMANOMETER
M13	/	(24) STERILE GAUZE PADS 4"x4"	M 39	/	1 LARGE SPHYGMOMANOMETER (Large adult or Thigh cuff)
M14	/	12 STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M 40	/	(2) PLASTIC BAGS WITH TIES
M15	/	(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M 41	/	CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIES
M16	/	(12) ROLLER BANDAGE 3" or 4"	M 42	/	SHARPS CONTAINER
M17	/	(12) TRIANGULAR BANDAGES	M 43	/	(2) EYE SHIELDS/FACE MASK
M18	/	ADHESIVE TAPE (1", 2" @ 2 ea)	M 44	/	GLOVES
M19	/	1 BANDAGE SHEARS	M 45	/	HAND CLEANER
M20	/	(2) BURN SHEETS	OTHER SUPPLIES		
	/	OBSTETRICAL KIT			
M22	/	POISON ANTIDOTE KIT			
	/		Z 01	/	PASG
	/		Z 02	/	SEMI-AUTOMATIC DEFIBRILATOR
	/		Z 03	/	AUTO-INJECTORABLE EPINEPHRINE

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR **3/5/98** DATE **3/5/98** SIGNATURE OF PERSON IN CHARGE OF SERVICE **3/9/98** DATE **3/9/98**

PLAN OF CORRECTION DUE **3/18/98**



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - VEHICLE

OEMS  
FORM  
500-21  
(8/96)

V-1

UNIT ID NO. 11 PAGE 2 of 5

SERVICE NUMBER 3928 SERVICE NAME Sherborn Fire Dept AMBULANCE CERT. 8224 EXP. 2/28/08 LICENSE PLATE NO. MC 5233 INSPECTOR [Signature] DATE 03.09.08

SECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER  
11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER

INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE	INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE
V01	/	STAR OF LIFE CERTIFICATE - 3.19	V22	/	WHEELS / TIRES - 3.6
V02	/	PAYLOAD ALLOWANCE - 3.5.2	V23	/	CHASSIS - FRAME / BODY MOUNTING - 3.10.7
V03	/	ELECTRICAL LOAD TEST - 3.7.6	V24	/	UNDERCOATING / RUSTPROOFING - 3.17
V04	/	GROSS VEHICLE WEIGHT RATING - 3.5.3	V25	/	FOUR WHEEL DRIVE COMPONENTS - 3.16
V05	/	INSTALLED O2 SYSTEM - 3.12.1	V26	/	SUPENSION - 3.6.5.10
V06	/	INSTALLED SUCTION SYSTEM - 3.12.3	V27	/	STEERING - 3.6.6
V07	/	LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1	V28	/	BRAKE SYSTEM - 3.6.5.7
V08	/	SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11	V29	/	EXHAUST SYSTEM - 3.6.4.6
V09	/	LITTER FASTENERS & ANCHORAGES - 3.11.7	V30	/	POWER UNIT - 3.6.3
V10	/	INTERIOR STORAGE ACCOMMODATIONS - 3.11	V31	/	AIR POLLUTION CONTROL - 3.6.4.3
V11	/	INTERIOR SURFACES - 3.10.17	V32	/	FUEL SYSTEM - 3.6.4.4
V12	/	PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8	V33	/	COOLING SYSTEM - 3.6.4.5
V13	/	NO SMOKING/SEAT BELT SIGNS - 3.15.2	V34	/	AUTOMATIC TRANSMISSION - 3.6.5.2
V14	/	ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13	V35	/	ELECTRICAL SYSTEM - 3.7.1
V15	/	DOORS/WINDOWS - 3.10	V36	/	BATTERY SYSTEM - 3.7.7
V16	/	BUMPERS & STEPS - 3.9.6	V37	/	DRIVERS COMPARTMENT / CONTROLS - 3.9
V17	/	AMBULANCE BODY STRUCTURE - 3.10	V38	/	MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11
V18	/	VEHICLE DIMENSIONS - 3.4.11	V39	/	ENVIRONMENTAL CONTROLS - 3.13
	/	EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2	V40	/	WARNING INDICATORS - 3.7.1.1
V20	/	COLOR, PAINT & FINISH - 3.16.2	V41	/	BACKUP ALARM - 3.15.2
V21	/	EMBLEMS & MARKINGS - 3.16	V42	/	HIGH - IDLE SPEED CONTROL - 3.7.6.1
			V43	/	WINDSHIELD WIPERS / WASHERS - 3.7.4
			V44	/	VALID RMV INSPECTION
			V45	/	HORN - 3.7.5
			V46	/	SPOLIGHT - 3.8
			V47	/	OUTSIDE REARVIEW MIRRORS - 3.9.5
			V48	/	SIREN / PUBLIC ADDRESS SYSTEM 3.14
			V49	/	HEADLIGHTS - 3.8
			V50	/	PARKING LIGHTS - 3.8
			V51	/	BRAKE LIGHTS - 3.8

3.2.11 Exhaust & marked for proper operation





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
 FORM  
 500-21  
 (8/96)

**V-2**

UNIT ID NO. 47 PAGE 3 of 5  
 DATE 030998

SERVICE NUMBER 3728 SERVICE NAME Sherborn Fire AMBULANCE CERT. 224 EXP. 2/98 LICENSE PLATE NO. MA 5053 INSPECTOR PH

INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD  
 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER 90 - OTHER

INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE	INSPECTION CODES		VEHICLE COMMENTS
V52	/	BACKUP LIGHTS - 3.8			
V53	/	TURN SIGNALS - 3.8			
V54	/	SIDEMARKER LIGHTS FLASH W /TURN SIGNALS) - 3.8			
V55	/	LICENSE PLATE LAMP (S) - 3.8			
V56	/	HAZARD WARNING LIGHTS - 3.8			
V57	/	CLEARANCE LAMPS (OPTIONAL) - 3.8			
V58	/	EMERGENCY LIGHTING - 3.8.2			
V59	)	FLOOD & LOAD LIGHTS - 3.8			
V60	/	VEHICLE PERFORMANCE - 3.4			
V61		MANUALS, & HANDBOOK OF INSTRUCTION - 3.2			
V62		WORKMANSHIP - 3.23			
<b>VEHICLE EQUIPMENT</b>					
E01	/	EQUIPMENT TO GAIN ACCESS			
E03	/	MAPS			
E04	/	FIRE EXTINGUISHERS, 1 IN PT. COMPT.			
E05	i	(2) SIX VOLT HANDLIGHTS			
E06	/	1 CHOCK BLOCK			
E07	/	(6) 30 MIN. ROAD FLARES OR (6) DOT REFLECTORS			
E08	/	HAZARDOUS MATERIAL GUIDEBOOKS			
E09	/	BINOCULARS			
E10	/	TRIAGE TAGS			
E11	/	PROTECTIVE EQUIPMENT (anticipated exposures) {x2}			
R01	/	TWO WAY RADIO DISPATCH			
R02	/	TWO WAY RADIO HOSPITAL			
R03	/	PORTABLE HOSPITAL RADIO (ALS)			



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

OEMS FORM  
 500-23 (5/91)

UNIT ID NO. 4 OF 5  
 PAGE

SERVICE NUMBER <b>3428</b>	SERVICE NAME <b>Shenbourn Fire</b>	AMBULANCE CERT <b>8024</b>	LICENSE PLATE NO. <b>File 5253</b>	UNIT ID NO. <b>A1</b>	INSPECTOR <b>AB</b>	DATE <b>03/09/06</b>
INSPECTION CODES 1 = COMPLIANT 11 = CORRECTED DURING INSPECTION		20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT		30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER		90 = OTHER

INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES		PARAMEDIC SUPPLIES
E 01B	/	PORTABLE MEDICAL RADIO	P 01	/	DEFIBRILATOR / CARDIAC MONITOR
			P 02	/	DEFIBRILATOR ACCESSORIES
A 01	/	IV THERAPY EQUIPMENT	P 03	/	AMINOPHYLLINE: 2 AMP @ 10 OR 20ml
A 02	/	CATHETERS, SIZES 14G - 25G	P 04	/	ARAMINE: 2 VIALS @ 10ml
A 03	/	ADMINISTRATION SETS, MACRO / MICRO	P 05	/	ATROPINE SULFATE: 4 mg
A 04	/	VENOUS TOURNIQUETS	P 06	/	BRETYLIUM TOSALATE: 50 mg/ml: 4 Amp @ 10ml
A 05	/	PADDED ARM BOARDS	P 07	/	CALCIUM CHLORIDE: 2gm
A 06	/	1" ADHESIVE TAPE OR EQUAL	P 08	/	DECADRON / HEXADOL: 20mg
A 07	/	ALCOHOL PREPS / ANTISEPTIC SWABS	P 09	/	D5W: 4 BAGS ANY SIZE
A 08	/	FLUIDS IN UNBREAKABLE CONTAINERS	P 10	/	D50W: 4 VIALS
A 09	/	D5W / LACTATED RINGERS / NS 9%	P 11	/	DIAZEPAM / VALIUM: PER PROTOCOL
A 10	/	NEEDLES, 18G - 21G, 1/2" - 2"	P 12	/	BENADRYL: 200mg
A 11	/	SYRINGES, 30cc & 50cc	P 13	/	DOBUTAMINE: 2 VIALS @ 20ml
A 12	/	VACUTAINER TUBES & NEEDLE SETS	P 14	/	EPINEPHRINE 1:1000: 2 AMPS
A 13	/	BLOOD LABELS	P 15	/	EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
14	/	EOA / EGTA / ET	P 16	/	LASIX: 200mg
A 15	/	30cc SYRINGE (EOA / EGTA)	P 17	/	DOPAMINE: 800mg
A 16	/	HEMOSTAT (EOA / EGTA)	P 18	/	ISUPREL: 4 VIALS
A 17	/	WATER SOLUBLE LUBRICANT (EOA / EGTA)	P 19	/	LACTATED RINGERS: 4 BAGS @ 1000ml
A 18	/	TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 20	/	LEVOPHED: 4 AMPS
A 19	/	LARYNGOSCOPE HANDLES(S) W/BATTERIES	P 21	/	LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pf SYRINGES @ 100mg
A 20	/	ET TUBES, SIZES 6.0 - 9.0mm	P 22	/	MANNITOL: PER PROTOCOL
A 21	/	MAGIL FORCEPS	P 23	/	CEMEROL: PER PROTOCOL (SCH II)
A 22	/	STRAIGHT AND CURVED BLADES	P 24	/	MORPHINE SULFATE: PER PROTOCOL (SCH II)
A 23	/	SPARE BATTERIES & BULB	P 25	/	NARCAN: 4 AMP @ 1ml
A 24	/	STYLETTE, COPPER OR FLEXIBLE	P 26	/	NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A 25	/	PEDI LARYNGOSCOPE (OPTION I-LEVEL)	P 27	/	NORMAL SALINE: 4 BAGS, ANY SIZE (250, 500, 1,000 ml)
A 26	/	PEDI TUBES, SIZES 2.0 - 6.0mm	P 28	/	OXYTOCIN / PITOCIN: 40 UNITS
A 27	/	STRAIGHT & CURVED CHILD BLADE	P 29	/	PROCAINAMIDE: 500mg
A 28	/	STRAIGHT & CURVED INFANT BLADE	P 30	/	INDERAL: 5 AMPS @ 1ml
A 29	/	PNEUMATIC ANTI-SHOCK GARMENT	P 31	/	SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A 30	/	PEDI PASG (OPTIONAL)	P 32	/	THIAMINE: 200mg
			P 33	/	VERAPAMIL: 4 AMPS @ 2ml
			P 34	/	ADDITIONAL MEDICATIONS PER REGIONAL PROTOCOL





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - SERVICE

CEMS  
FORM  
500-24  
(8/96)

S

PAGE 5 OF 5

SERVICE NUMBER <b>1928</b>	SERVICE NAME <b>Shenbourn Fire Department</b>	LICENSEE <b>Town of Shenbourn</b>	DATE <b>03/09/98</b>
ADDRESS <b>22 North Main Street</b>		BUSINESS PHONE <b>508-651-7869</b>	INSPECTOR <b>PAB</b>
CITY/STATE/ZIP <b>Shenbourn MA 01770</b>		MANAGER NAME <b>Ronald Buchler Jr</b>	OFFICE USE ONLY <b>Lt Pam Douce Josh Buchler</b>

INSPECTION CODES: 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER  
11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER

INSPECTION CODES		SERVICE OPERATIONS 170.200 ET SEQ	INSPECTION CODES		WRITTEN POLICIES & PROCEDURES 170.235
S 01	1	LICENSURE	S 27	1	CERTIFICATION & RECERT OF PERSONNEL
S 02	1	CERTIFICATION OF VEHICLES & PERSONNEL	S 28	1	RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT
S 03	1	STAFFING <b>7 E A's 18:00 - 0:00 A's</b>	S 29	1	DELIVERY OF PT. TO NEAREST APP. FACILITY
S 04	1	INSURANCE	S 30	1	NON-DISCRIMINATION
S 05	1	ADVERTISING	S 31	1	BACKUP SERVICES
S 06	1	INCIDENT OR ACCIDENT REPORTS	S 32	1	USE OF BACKUP SERVICES
S 07	21 11	DISPLAY OF LICENSE <b>8 displayed in Vehicle</b>	S 33	1	DISPATCH
S 08	1	RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT	S 34	1	COMMUNICATIONS
S 09	1	PUBLIC ACCESS <b>2 P.O.</b>	S 35	1	STOCKING SUPPLIES
S 10	1	DISPATCH COMMUNICATIONS	S 36	1	SANITARY PRACTICES
S 11	1	MEDICAL COMMUNICATIONS	S 37	1	USE OF LIGHTS & WARNING SIGNALS
S 12	1	AVAILABILITY & BACKUP	S 38	1	STAFFING OF AMBULANCES
S 13	1	SPECIAL REQUIREMENTS TO OPERATE CLASS V	S 39	21	CONDUCT OF PERSONNEL <b>HSA &amp; Policy</b>
S 14	1	HEATED GARAGE	S 40	1	MECHANICAL FAILURES
S 15	1	STORAGE SPACE	S 41	21	INSPECTION AUTHORITIES <b>Expand include F&amp;D</b>
S 16	1	SUPPLIES	S 42	1	TRANSPORT OF DEAD BODIES
S 17	1	NON-DISCRIMINATION	S 43	1	PARENT RIGHTS
S 18	1	AFFILIATION AGREEMENT	S 44	1	PATIENT RESTRAINTS
S 19	21	ALS PROCEDURES & POLICIES <b>Link. MHA List policies to En House ALS</b>	S 45	21	DISPOSAL OF HAZARDOUS WASTE <b>Expand when &amp; transport</b>
S 20	1	REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995 <b>MHA 0146236 12/97</b>	S 46	1	MANDATED REPORTING
RECORDS 170.240			S 47	1	INFECTION CONTROL PROCEDURES
S 21	1	PERSONNEL <b>Personnel</b>	S 48	1	DESIGNATED INFECTION CONTROL OFFICER
S 22	21	PREVENTIVE MAINTENANCE <b>Epi pens &amp; Added to list - ALS checked</b>	S 49	21	TRIP RECORDS LEFT @ RECEIVING FACILITIES <b>&amp; Written</b>
S 23	1	VEHICLE REGISTRATION <b>&amp; Available</b>	S 50	1	INFECTION CONTROL PROCEDURES
S 24	1	FAA CERTIFICATION (CLASS IV)	S 51	20	MAINTENANCE OF DEFIBRILLATOR <b>&amp; Written</b>
S 25	1	LICENSES FOR PILOTS (CLASS IV)	S 52	20	CONTROL & INSPECTION OF EPI-PENS <b>&amp; Written</b>
S 26	1	FCC LICENSES			
S 27	1	TRIP RECORDS			
S 28	1	TRIP RECORDS LEFT @ RECEIVING FACILITY			





**Massachusetts Department of Public Health  
Office of Emergency Medical Services  
Ambulance Regulation Program  
PLAN OF CORRECTION**



Service Number  
**3 | 9 | 2 | 8**

License Expiration Date  
**3/28/98**

Insp. **PVB**

RESPONSE DUE BY:

Service Name **Sherborn Fire Dept**

VEHICLE INFORMATION (If Applicable)			
License Plate Number <b>FIRE 5253</b>		Is this vehicle a(n) <u>  </u> Addition <u>  </u> Replacement <input checked="" type="checkbox"/> Renewal	
		Ambulance Class <b>I</b>	Vehicle Unit Id <b>A1</b>
Vehicle Identification Number		<b>1   F   D   K   E   3   0   L   6   G   H   A   7   8   5   5   4</b>	
Page	Citation	Providers Plan of Correction (provide details of corrective action that satisfies reported deficiencies) (for page and citation number refer to inspection report form)	Completion Date
5	S19	Update policies	4/1/98
5	S22	Added to maintenance list, use ALS Checklists monthly - Keep in binder	5/1/98
5	S39	Updated policy	4/1/98
5	S41	Updated policy	4/1/98
5	S45	Updated policy	4/1/98
5	S49	Updated policy	4/1/98
5	S51	Created policy	5/1/98
5	S52	Created policy	5/1/98
Licensee representative's signature <b>Amela Druse</b>		Title <b>LT</b>	Date <b>3/9/98</b>



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

CEMS  
FORM  
500-22  
(8/96)



SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Sharon FIRE Dept</b>	AMB. CERT#	EXP	CLASS <b>I</b>	VEH TYPE <b>III</b>	LEVEL <b>AKSI</b>	DATE <b>99.3.097</b>	UNIT ID NO <b>121</b>	PAGE <b>1 of 4</b>
VEHICLE IDENTIFICATION NUMBER <b>1 FALIE 410 F X U H A 75 173</b>		LICENSE PLATE NO <b>5253</b>		INSPECTED BY <b>103</b>		INSPECTION TYPE <input checked="" type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input type="checkbox"/> Renew			
LOCATION		CHASSIS/ DATE <b>FORD 1/97</b>		BODY/DATE <b>E-1 5/97</b>		MILEAGE <b>12720</b>			
CREW NAME 1		EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	INSPECTION CODES		
CREW NAME 2		EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT 11- CORRECTED DURING INSP. 20- NOT COMPLIANT 21- PARTIALLY COMPLIANT 30- UNSANITARY - BIOHAZARD 31- UNSANITARY - OTHER 90- OTHER		

INSPECTION CODES		BLS SUPPLIES	
M01	/		1 AMBULANCE COT
M02A	/		1 ADULT BAG MASK VENTILATOR
M02B	/		1 PEDI BAG MASK VENTILATOR
M03A	/		1 PORTABLE O2 RESUSC. W/ ACCESSORIES
M03B	/		INSTALLED O2 SYSTEM SUPPLIES
M04	/		1 PORTABLE SUCTION UNIT
M05	/		#1 FIRST AID KIT
M05A	/		#2 FIRST AID KIT
M06	/		TRACTION SPLINTS (Adult, Child) W/ACCESSORIES
M07	/		PADDED BOARD SPLINTS (2 @ 2 SIZES)
M08	/		1 FULL SPINE BOARD W/ACCESSORIES
M08A	/		1 HALF SPINE BOARD W/ACCESSORIES
M09	/		STAIR CHAIR
M10	/		AUXILIARY STRETCHER
M11	/		TRANSFER SHEET
M12	/		WRAPPED OROPHARYNGEAL, NASAL AIRWAYS
M13	/		(24) STERILE GAUZE PADS 4"x4"
M14	/		12 STERILE DRESSINGS 5"x9" or SANITARY NAPKINS
M15	/		(6) STERILE UNIVERSAL DRESSINGS 10"x30"
M16	/		(12) ROLLER BANDAGE 3" or 4"
M17	/		(12) TRIANGULAR BANDAGES
M18	/		ADHESIVE TAPE (1", 2" @ 2 ea)
M19	/		1 BANDAGE SHEARS
M20	/		(2) BURN SHEETS
M21	/		OBSTETRICAL KIT
M22	/		POISON ANTIDOTE KIT

INSPECTION CODES		BLS SUPPLIES	
M 23	/		(2) IRRIGATION FLUID
M24	/		1 ROLL STERILE ALUMINUM FOIL
M25	/		1 ROLL POLYETHYLENE FILM
M26	/		1 ADULT BEDPAN
M27	/		MOTION SICKNESS BAGS (2)
M 28	/		2 PILLOWS W/WATERPROOF COVERS
M 29	/		8 SHEETS
M 30	/		4 BLANKETS
M 31	/		4 TOWELS
M 32	/		2 BOXES DISPOSABLE PAPER TISSUES
M 33	/		2 PACKAGES OF DISPOSABLE DRINKING CUPS
M 34	/		4 COLD PACKS
M 35	/		INFECTION CONTROL KIT (2 EMT'S)
M 36	/		IMMOBILIZATION BAGS (2) 6"x9"
M 37	/		1 RING CUTTER
M 38	/		1 CHILD SIZE SPHYGMOMANOMETER
M 39	/		1 LARGE SPHYGMOMANOMETER (Large adult or Thigh cuff)
M 40	/		(2) PLASTIC BAGS WITH TIES
M 41	/		CONTAMINATED TRASH CONTAINER W/ BIO-HAZARD BAGS & TIES
M 42	/		SHARPS CONTAINER
M 43	/		(2) EYE SHIELDS/FACE MASK
M 44	/		GLOVES
M 45	/		HAND CLEANER

OTHER SUPPLIES	
Z 01	/ PASG
Z 02	/ SEMI-AUTOMATIC DEFIBRILATOR
Z 03	/ AUTO-INJECTORABLE EPINEPHRINE

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR: *[Signature]* DATE: **9/30/97** SIGNATURE OF PERSON IN CHARGE OF SERVICE: *[Signature]* DATE: **9/30/97**

PLAN OF CORRECTION DUE: **10/14/97**





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - VEHICLE

OEMS  
FORM  
500-21  
(8/96)

V-1

UNIT ID NO. A-1 PAGE 2 of 4

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP.	LICENSE PLATE NO.	INSPECTOR	DATE
3928	Sharon Fire			PL 5253	PHS	09/30/97
INSPECTION CODES: 1 - COMPLIANT, 20 - NOT COMPLIANT, 30 - UNSANITARY - BIOHAZARD, 90 - OTHER 11 - CORRECTED DURING INSPECTION, 21 - PARTIALLY COMPLIANT, 31 - UNSANITARY - OTHER						
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE					
V01	1	STAR OF LIFE CERTIFICATE - 3.19				
V02	1	PAYLOAD ALLOWANCE - 3.5.2				
V03	1	ELECTRICAL LOAD TEST - 3.7.6 160+				
V04	1	GROSS VEHICLE WEIGHT, RATING - 3.5.3 1450... Remain 3855				
V05	X 21	INSTALLED O2 SYSTEM - 3.12.1 4.4.6. test sticks & IEAT				
V06	X 21	INSTALLED SUCTION SYSTEM - 3.12.3 Suction Sucks & Separately identified from Grouping				
V07	X 21	LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1 Loose Equipment in Action Areas				
V08	X 21	SQUAD BENCH, SEATS, & BACKRESTS - 3.10.3.11 More padding need for head protection in Jump Seat Area				
V09	1	LITTER FASTENERS & ANCHORAGES - 3.11.7				
V10	1	INTERIOR STORAGE ACCOMMODATIONS - 3.11				
V11	X 31	INTERIOR SURFACES - 3.10.17 Dirt along Back of Squad Bench				
V12	1	PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8				
V13	1	NO SMOKING/SEAT BELT SIGNS - 3.15.2				
V14	1	ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13				
V15	1	DOORS/WINDOWS - 3.10				
V16	1	BUMPER & STEPS - 3.9.6				
V17	1	AMBULANCE BODY STRUCTURE - 3.10				
V18	1	VEHICLE DIMENSIONS - 3.4.11				
V19	1	EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2				
V20	1	COLOR, PAINT & FINISH - 3.16.2				
V21	1	EMBLEMS & MARKINGS - 3.16				
INSPECTION CODES	VEHICLE CONSTRUCTION & MAINTENANCE					
V22	1	WHEELS / TIRES - 3.6				
V23	1	CHASSIS - FRAME / BODY MOUNTING - 3.10.7				
V24	1	UNDERCOATING / RUSTPROOFING - 3.17				
V25	1	FOUR WHEEL DRIVE COMPONENTS - 3.16				
V26	X 21	SUSPENSION - 3.6.5.10 Spot Check & meet brand Clearance 6'				
V27	1	STEERING - 3.6.6				
V28	1	BRAKE SYSTEM - 3.6.5.7				
V29	1	EXHAUST SYSTEM - 3.6.4.6				
V30	1	POWER UNIT - 3.6.3				
V31	1	AIR POLLUTION CONTROL - 3.6.4.3				
V32	1	FUEL SYSTEM - 3.6.4.4				
V33	1	COOLING SYSTEM - 3.6.4.5				
V34	1	AUTOMATIC TRANSMISSION - 3.6.5.2				
V35	X 21	ELECTRICAL SYSTEM - 3.7.1 Loose wires in Elect. Comp - & Secured				
V36	1	BATTERY SYSTEM - 3.7.7				
V37	1	DRIVERS COMPARTMENT / CONTROLS - 3.9				
V38	1	MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11				
V39	1	ENVIRONMENTAL CONTROLS - 3.13				
V40	1	WARNING INDICATORS - 3.7.1.1				
V41	1	BACKUP ALARM - 3.15.2				
V42	X 21	HIGH - IDLE SPEED CONTROL - 3.7.6.1 E brake & marked for operation				
V43	1	WINDSHIELD WIPERS / WASHERS - 3.7.4				
V44	1	VALID RMV INSPECTION				
V45	1	HORN - 3.7.5				
V46	21	SPOTLIGHT - 3.8 & Secured				
V47	1	OUTSIDE REARVIEW MIRRORS - 3.9.5				
V48	1	SIREN / PUBLIC ADDRESS SYSTEM - 3.14				
V49	1	HEADLIGHTS - 3.8				
V50	1	PARKING LIGHTS - 3.8				
V51	1	BRAKE LIGHTS - 3.8				





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
 FORM  
 500-21  
 (8/96)

**V-2**

UNIT ID NO. **A-1** PAGE **3 of 4**  
 DATE **09.30.07**

SERVICE NUMBER	SERVICE NAME	AMBULANCE CERT.	EXP	LICENSE PLATE NO	INSPECTOR	DATE
<b>3928</b>	<i>Shuborn Fire</i>			<i>MA 5253</i>	<i>FOB</i>	<i>09.30.07</i>
INSPECTION CODES    1 - COMPLIANT    20 - NOT COMPLIANT    30 - UNSANITARY - BIOHAZARD 11 - CORRECTED DURING INSPECTION    21 - PARTIALLY COMPLIANT    31 - UNSANITARY - OTHER    90 - OTHER						
INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE			INSPECTION CODES	
		VEHICLE COMMENTS				
V52	/	BACKUP LIGHTS - 3.8				
V53	/	TURN SIGNALS - 3.8				
V54	/	SIDEMARKER LIGHTS FLASH W /TURN SIGNALS) - 3.8				
V55	/	LICENSE PLATE LAMP (S) - 3.8				
V56	/	HAZARD WARNING LIGHTS - 3.8				
V57	/	CLEARANCE LAMPS (OPTIONAL) - 3.8				
V58	/	EMERGENCY LIGHTING - 3.8.2				
V59	/	FLOOD & LOAD LIGHTS - 3.8				
V60	/	VEHICLE PERFORMANCE - 3.4				
V61	/	MANUALS, & HANDBOOK OF INSTRUCTION - 3.2				
V62	<i>K21</i>	WORKMANSHIP - 3.23 <i>TRAY has Edge that will catch @ corner near Jump Seat</i>				
		VEHICLE EQUIPMENT				
E01	/	EQUIPMENT TO GAIN ACCESS				
E03	/	MAPS				
E04	/	FIRE EXTINGUISHERS, 1 IN PT. COMPT.				
E05	/	(2) SIX VOLT HANDLIGHTS				
E06	/	1 CHOCK BLOCK				
E07	/	(6) 30 MIN. ROAD FLARES OR (6) DOT REFLECTORS				
E08	/	HAZARDOUS MATERIAL GUIDEBOOKS				
E09	/	BINOCULARS				
E10	/	TRIAGE TAGS				
E11	/	PROTECTIVE EQUIPMENT (anticipated exposures) (x2)				
R01	/	TWO WAY RADIO DISPATCH				
R02	/	TWO WAY RADIO HOSPITAL				
R03	/	PORTABLE HOSPITAL RADIO (ALS)				



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

 OEMS FORM  
 500-23 (5/91) **A**

 UNIT ID NO **44** PAGE OF **4**

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Spauldon Fire Dept</b>	AMBULANCE CERT <b>MA 5253</b>	LICENSE PLATE NO <b>AI</b>	UNIT ID NO <b>AI</b>	INSPECTOR <b>MB</b>	DATE <b>09/30/97</b>
INSPECTION CODES 1 = COMPLIANT 11 = CORRECTED DURING INSPECTION		20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT		30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER		90 = OTHER

INSPECTION CODES		INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES		PARAMEDIC SUPPLIES
E 01B	/	PORTABLE MEDICAL RADIO	P 01		DEFIBRILATOR / CARDIAC MONITOR
			P 02		DEFIBRILATOR ACCESSORIES
A 01	/	IV THERAPY EQUIPMENT	P 03		AMINOPHYLLINE: 2 AMP @ 10 OR 20ml
A 02	/	CATHETERS, SIZES 14G - 25G	P 04		ARAMINE: 2 VIALS @ 10ml
A 03	/	ADMINISTRATION SETS, MACRO / MICRO	P 05		ATROPINE SULFATE: 4 mg
A 04	/	VENOUS TOURNIQUETS	P 06		BRETYLIUM TOSALATE: 50 mg/ml: 4 Amp @ 10ml
A 05	/	PADDED ARM BOARDS	P 07		CALCIUM CHLORIDE: 2gm
A 06	/	1" ADHESIVE TAPE OR EQUAL	P 08		DECADRON / HEXADOL: 20mg
A 07	/	ALCOHOL PREPS / ANTISEPTIC SWABS	P 09		D5W: 4 BAGS ANY SIZE
A 08	/	FLUIDS IN UNBREAKABLE CONTAINERS	P 10		D50W: 4 VIALS
A 09	/	D5W / LACTATED RINGERS / NS 9%	P 11		DIAZEPAM / VALIUM: PER PROTOCOL
A 10	/	NEEDLES, 18G - 21G, 1/2" - 2"	P 12		BENADRYL: 200mg
A 11	/	SYRINGES, 30cc & 50cc	P 13		DOBUTAMINE: 2 VIALS @ 20ml
A 12	/	VACUTAINER TUBES & NEEDLE SETS	P 14		EPINEPHRINE 1:1000: 2 AMPS
A 13	/	BLOOD LABELS	P 15		EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
A 14	/	EOA / EGTA / ET	P 16		LASIX: 200mg
A 15	/	30cc SYRINGE (EOA / EGTA)	P 17		DOPAMINE: 800mg
A 16	/	HEMOSTAT (EOA / EGTA)	P 18		ISUPREL: 2 VIALS
A 17	/	WATER SOLUBLE LUBRICANT (EOA / EGTA)	P 19		LACTATED RINGERS: 4 BAGS @ 1000ml
A 18	/	TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 20		LEVOPHED: 4 AMPS
A 19	/	LARYNGOSCOPE HANDLES(S) W/BATTERIES	P 21		LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pf SYRINGES @ 100mg
A 20	21	ET TUBES, SIZES 6.0 - 9.0mm <i>Some tube sizes</i>	P 22		MANNITOL: PER PROTOCOL
A 21	/	MAGIL FORCEPS	P 23		DEMEROL: PER PROTOCOL (SCH II)
A 22	/	STRAIGHT AND CURVED BLADES	P 24		MORPHINE SULFATE: PER PROTOCOL (SCH II)
A 23	/	SPARE BATTERIES & BULB	P 25		NARCAN: 4 AMP @ 1ml
A 24	/	STYLETTE, COPPER OR FLEXIBLE	P 26		NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A 25	21	PEDI LARYNGOSCOPE (OPTION I-LEVEL) <i>Some tube sizes</i>	P 27		NORMAL SALINE: 4 BAGS, ANY SIZE (250, 500, 1,000 ml)
A 26	/	PEDI TUBES, SIZES 2.0 - 6.0mm	P 28		OXYTOCIN / PITOCIN: 40 UNITS
A 27	/	STRAIGHT & CURVED CHILD BLADE	P 29		PROCAINAMIDE: 500mg
A 28	/	STRAIGHT & CURVED INFANT BLADE	P 30		INDERAL: 5 AMPS @ 1ml
A 29	/	PNEUMATIC ANTI-SHOCK GARMENT	P 31		SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A 30	/	PEDI PASG (OPTIONAL)	P 32		THIAMINE: 200mg
			P 33		VERAPAMIL: 4 AMPS @ 2ml
			P 34		ADDITIONAL MEDICATIONS PER REGIONAL PROTOCOL

SERVICE - ORIGINAL



**Massachusetts Department of Public Health  
Office of Emergency Medical Services  
Ambulance Regulation Program  
PLAN OF CORRECTION**



Service Number  
**319218**

License Expiration Date  
**9/30/97**

Insp.  
**PB**

RESPONSE DUE BY:  
**OCT 14**

Service Name  
**Sherborn Fire Department**

VEHICLE INFORMATION (If Applicable)				
License Plate Number <b>FIRE 5253</b>		Is this vehicle a(n) <u>  </u> Addition <input checked="" type="checkbox"/> Replacement <u>  </u> Renewal		
Ambulance Class <b>I</b>		Vehicle Unit Id <b>A1</b>		
Vehicle Identification Number		<b>11F0L40FXVHA7511713</b>		
Page	Citation	Providers Plan of Correction (provide details of corrective action that satisfies reported deficiencies) (for page and citation number refer to inspection report form)	Completion Date	
2	V05	*Greenwood is scheduling A1 for repairs for ~ 2 weeks. They have a team working repairing the interior laminant problem not sure when they will reach us, but guaranteed before year end. Secured action area. also reduced equipment & supplies located there. and at that time they will correct these citations also.	12/31/97	
2	V06			
2	V07		10/1/97	
2	V08		12/31/97	
2	V26			
2	V35			
2	V42			
2	V46			
3	V62			10/1/97
4	A20		added small (more) ET Tubes	10/1/97
4	A25	added more tube sizes		
Licensee representative's signature <b>Pamela Dwyer</b>		Title <b>LT.</b>	Date <b>10/14/97</b>	



ATTN: John - 508-695-9047

John,

Attached is a listing of items that were noted by our state inspector. Please review and call me at your convenience to schedule a time for our ambulance to be serviced. We also still need the inside work to the molding fixed.

My home number is 508-653-1215

- 1). On the installed O2 tank there needs to be a sticker that stated the system was checked and passed.
- 2). The suction switch on the control panel needs to be a different color than the other options. Suggested changing all colors to green except the suction.
- 3). On the CPR seat he requested more padding for the back of the head protection. Sides were fine.
- 4). The spot chains need a minimum clearance of 6 inches, ours were 5 inches.
- 5). There were some loose wires in the electrical compartment, not sure if you can help with this or if we need to contact our radio people.
- 6). There needs to be a sticker near the emergency brake marked for operation.
- 7). The spotlight needs to be secured. The current method is not working, does not stay secured.
- 8). The action tray has an edge to it that needs to be rounded off, or a piece needs to go around the corner so nothing gets caught on it.

Thank you!  
Pam Douse  
Sherborn Fire Department



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES

OSMS  
FORM  
500-22  
(8/96)



AMBULANCE INSPECTION REPORT FORM - BLS SUPPLIES & VEHICLE EQUIPMENT

SERVICE NUMBER <b>3928</b>	SERVICE NAME <b>Shickborn Fire Dept</b>	AMB. CERT. NO. <b>6875</b>	EXP. DATE <b>6/9/97</b>	CLASS <b>I</b>	VEH. TYPE/LEVEL <b>TH BLSI</b>	UNIT ID NO. <b>A-1</b>	PAGE <b>1 of 5</b>
VEHICLE IDENTIFICATION NUMBER <b>1FID4E30L66H9781554</b>		LICENSE PLATE NO. <b>5253</b>	INSPECTED BY <b>PHS</b>	INSPECTION TYPE <input type="checkbox"/> Replace <input type="checkbox"/> Addition <input type="checkbox"/> Interim <input type="checkbox"/> Renew		DATE <b>2.1.09.7</b>	

LOCATION	CHASSIS/ DATE <b>Ford</b>	BODY/DATE <b>W/C 2/96</b>	MILEAGE <b>12,548.8</b>
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CREW NAME 1	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	1 - COMPLIANT	INSPECTION CODES
CREW NAME 2	EMT NUMBER	EMT EXP	ACLS EXP	CPR EXP	DR. LIC.	11 - CORRECTED DURING INSP. 30 - UNSANITARY - BIOHAZARD	
						20 - NOT COMPLIANT 31 - UNSANITARY - OTHER	
						21 - PARTIALLY COMPLIANT 90 - OTHER	

INSPECTION CODES		BLS SUPPLIES	INSPECTION CODES		BLS SUPPLIES
M01	Y 31	1 AMBULANCE COT <i>third strap missing</i>	M 23	i	(2) IRRIGATION FLUID
M02A	i	1 ADULT BAG MASK VENTILATOR	M24	i	1 ROLL STERILE ALUMINUM FOIL
M02B	i	1 PEDI BAG MASK VENTILATOR	M25	i	1 ROLL POLYETHYLENE FILM
M03A	i	1 PORTABLE O2 RESUSC. W/ ACCESSORIES	M26	i	1 ADULT BEDPAN
M03B	i	INSTALLED O2 SYSTEM SUPPLIES	M27	i	MOTION SICKNESS BAGS (2)
M04	i	1 PORTABLE SUCTION UNIT	M 28	i	2 PILLOWS W/WATERPROOF COVERS
M05	21 11	#1 FIRST AID KIT <i>Penlight &amp; bandaging</i>	M 29	i	8 SHEETS
M05A	i	#2 FIRST AID KIT <i>bandaging</i>	M 30	i	4 BLANKETS
M06	i	TRACTION SPLINTS (Adult, Child) W/ACCESSORIES	M 31	i	4 TOWELS
M07	i	PADDED BOARD SPLINTS (2 @ 2 SIZES)	M 32	i	2 BOXES DISPOSABLE PAPER TISSUES
M08	i	1 FULL SPINE BOARD W/ACCESSORIES	M 33	i	2 PACKAGES OF DISPOSABLE DRINKING CUPS
M08A	i	1 HALF SPINE BOARD W/ACCESSORIES	M 34	i	4 COLD PACKS
M09	i	STAIR CHAIR	M 35	i	INFECTION CONTROL KIT (2 EMT'S)
M10	i	AUXILIARY STRETCHER	M 36	i	IMMOBILIZATION BAGS (2) 6"x9"
M11	i	TRANSFER SHEET	M 37	i	1 RING CUTTER
M12	i	WRAPPED OROPHARYNGEAL, NASAL AIRWAYS	M 38	X 21	1 CHILD SIZE SPHYGMOMANOMETER <i>&amp; calibrated 10/94</i>
M13	i	(24) STERILE GAUZE PADS 4"x4"	M 39	i	1 LARGE SPHYGMOMANOMETER (Large adult or Thigh cuff)
M14	i	12 STERILE DRESSINGS 5"x9" or SANITARY NAPKINS	M 40	i	(2) PLASTIC BAGS WITH TIES
M15	i	(6) STERILE UNIVERSAL DRESSINGS 10"x30"	M 41	i	CONTAMINATED TRASH CONTAINER W/ BIOHAZARD BAGS & TIES
M16	i	(12) ROLLER BANDAGE 3" or 4"	M 42	i	SHARPS CONTAINER
M17	i	(12) TRIANGULAR BANDAGES	M 43	i	(2) EYE SHIELDS/FACE MASK
M18	i	ADHESIVE TAPE (1", 2" @ 2 ea)	M 44	i	GLOVES
M19	i	1 BANDAGE SHEARS	M 45	i	HAND CLEANER
M20	i	(2) BURN SHEETS			
M21	i	OBSTETRICAL KIT			
M22	i	POISON ANTIDOTE KIT			

OTHER SUPPLIES

Z 01	i	PASG
Z 02	i	SEMI-AUTOMATIC DEFIBRILATOR
Z 03	i	AUTO-INJECTORABLE EPINEPHRINE

I, the undersigned representative of the above service, acknowledge receipt of a copy of this inspection form, applicable supplemental forms and corrective action statements

SIGNATURE OF INSPECTOR *[Signature]* DATE **2/10/97** SIGNATURE OF PERSON IN CHARGE OF SERVICE *[Signature]* DATE **2/10/97** PLAN OF CORRECTION DUE **2/24/97**



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
 FORM  
 500-21  
 (8/96)

**V-1**

UNIT ID NO. 11 PAGE 2 OF 5

SERVICE NUMBER <u>3928</u>	SERVICE NAME <u>Sherborn Fire Dept</u>	AMBULANCE CERT <u>6875</u>	EXP <u>4/9/17</u>	LICENSE PLATE NO <u>ARC 5253</u>	INSPECTOR <u>POS</u>	DATE <u>02.19.07</u>
SECTION CODES		1 - COMPLIANT		20 - NOT COMPLIANT		30 - UNSANITARY - BIOHAZARD
		11 - CORRECTED DURING INSPECTION		21 - PARTIALLY COMPLIANT		31 - UNSANITARY - OTHER
						90 - OTHER

INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE	INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE
V01	/	STAR OF LIFE CERTIFICATE - 3.19	V22	/	WHEELS / TIRES - 3.6
V02	/	PAYLOAD ALLOWANCE - 3.5.2	V23	/	CHASSIS - FRAME / BODY MOUNTING - 3.10.7
V03	/	ELECTRICAL LOAD TEST - 3.7.6	V24	/	UNDERCOATING / RUSTPROOFING - 3.17
V04	/	GROSS VEHICLE WEIGHT RATING - 3.5.3	V25	/	FOUR WHEEL DRIVE COMPONENTS - 3.16
V05	21 //	INSTALLED O2 SYSTEM - 3.12.1 <i>Slow leak</i>	V26	/	SUPENSION - 3.6.5.10
V06	/	INSTALLED SUCTION SYSTEM - 3.12.3	V27	/	STEERING - 3.6.6
V07	/	LOCATION OF MEDICAL EQUIPMENT & SUPPLIES - 3.11.1	V28	/	BRAKE SYSTEM - 3.6.5.7
V08	/	SQUAD BENCH, SEATS, & BACKRESTS - 3.10, 3.11	V29	/	EXHAUST SYSTEM - 3.6.4.6
V09	X 21	LITTER FASTENERS & ANCHORAGES - 3.11.7 <i>Hooks on floor &amp; identified</i>	V30	/	POWER UNIT - 3.6.3
V10	/	INTERIOR STORAGE ACCOMMODATIONS - 3.11	V31	/	AIR POLLUTION CONTROL - 3.6.4.3
V11	/	INTERIOR SURFACES - 3.10.17	V32	/	FUEL SYSTEM - 3.6.4.4
V12	/	PT. COMPARTMENT CONTROLS/ILLUMINATION - 3.8	V33	/	COOLING SYSTEM - 3.6.4.5
V13	/	NO SMOKING/SEAT BELT SIGNS - 3.15.2	V34	/	AUTOMATIC TRANSMISSION - 3.6.5.2
V14	/	ENVIRONMENTAL SYSTEMS/CONTROLS - 3.13	V35	/	ELECTRICAL SYSTEM - 3.7.1
V15	/	DOORS/WINDOWS - 3.10	V36	/	BATTERY SYSTEM - 3.7.7
V16	/	BUMPERS & STEPS - 3.9.6	V37	/	DRIVERS COMPARTMENT / CONTROLS - 3.9
V17	/	AMBULANCE BODY STRUCTURE - 3.10	V38	/	MARKING OF SWITCHES, INDICATORS, CONTROL DEVICES - 3.7.11
V18	/	VEHICLE DIMENSIONS - 3.4.11	V39	/	ENVIRONMENTAL CONTROLS - 3.13
V19	/	EXTERIOR STORAGE ACCOMMODATIONS - 3.11.2	V40	/	WARNING INDICATORS - 3.7.1.1
V20	X 21	COLOR, PAINT & FINISH - 3.16.2 <i>SAME RUST AROUND DOORS</i>	V41	/	BACKUP ALARM - 3.15.2
V21	/	EMBLEMS & MARKINGS - 3.16	V42	/	HIGH - IDLE SPEED CONTROL - 3.7.6.1
			V43	/	WINDSHIELD WIPERS / WASHERS - 3.7.4
			V44	/	VALID RMV INSPECTION
			V45	/	HORN - 3.7.5
			V46	/	SPOLIGHT - 3.8
			V47	/	OUTSIDE REARVIEW MIRRORS - 3.9.5
			V48	/	SIREN / PUBLIC ADDRESS SYSTEM 3.14
			V49	/	HEADLIGHTS - 3.8
			V50	/	PARKING LIGHTS - 3.8
			V51	/	BRAKE LIGHTS - 3.8





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - VEHICLE

CEMS  
 FORM  
 500-21  
 (8/96)

V-2

UNIT ID NO. A-1 PAGE 3 of 5  
 DATE 02.10.06

SERVICE NUMBER <b>3728</b>	SERVICE NAME <b>Shenburn Fire Dept</b>	AMBULANCE CERT <b>6875</b>	EXP <b>2/9/07</b>	LICENSE PLATE NO <b>Free 5253</b>	INSPECTOR <b>PLB</b>	DATE <b>02.10.06</b>
INSPECTION CODES		1 - COMPLIANT 11 - CORRECTED DURING INSPECTION		20 - NOT COMPLIANT 21 - PARTIALLY COMPLIANT		30 - UNSANITARY - BIOHAZARD 31 - UNSANITARY - OTHER 90 - OTHER
INSPECTION CODES		VEHICLE CONSTRUCTION & MAINTENANCE				INSPECTION CODES
V52	/	BACKUP LIGHTS - 3.8				
V53	/	TURN SIGNALS - 3.8				
V54	/	SIDEMARKER LIGHTS FLASH W (TURN SIGNALS) - 3.8				
V55	/	LICENSE PLATE LAMP (S) - 3.8				
V56	/	HAZARD WARNING LIGHTS - 3.8				
V57	/	CLEARANCE LAMPS (OPTIONAL) - 3.8				
V58	/	EMERGENCY LIGHTING - 3.8.2				
V59	/	FLOOD & LOAD LIGHTS - 3.8				
V60	/	VEHICLE PERFORMANCE - 3.4				
V61	/	MANUALS, & HANDBOOK OF INSTRUCTION - 3.2				
V62	/	WORKMANSHIP - 3.23				
VEHICLE EQUIPMENT						
E01	/	EQUIPMENT TO GAIN ACCESS				
E03	/	MAPS				
E04	/	FIRE EXTINGUISHERS, 1 IN PT. COMPT.				
E05	/	(2) SIX VOLT HANDLIGHTS				
E06	/	1 CHOCK BLOCK				
E07	/	(6) 30 MIN. ROAD FLARES OR (6) DOT REFLECTORS				
E08	/	HAZARDOUS MATERIAL GUIDEBOOKS				
E09	/	BINOCULARS				
E10	/	TRIAGE TAGS				
E11	/	PROTECTIVE EQUIPMENT (anticipated exposures) (x2)				
R01	/	TWO WAY RADIO DISPATCH				
R02	/	TWO WAY RADIO HOSPITAL				
R03	/	PORTABLE HOSPITAL RADIO (ALS)				



MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
**OFFICE OF EMERGENCY MEDICAL SERVICES**  
 AMBULANCE INSPECTION REPORT FORM - ADVANCED LIFE SUPPORT

 OEMS FORM  
 500-23 (5/91)

SERVICE NUMBER <b>3908</b>	SERVICE NAME <b>Shenborn Fire Dept</b>	AMBULANCE CERT <b>0875</b>	LICENSE PLATE NO <b>FW 523</b>	UNIT ID NO <b>A-1</b>	INSPECTOR <b>PLB</b>	DATE <b>02/10/96</b>	UNIT ID NO <b>45</b>	PAGE OF <b>5</b>
SPECTION CODES 1 = COMPLIANT 11 = CORRECTED DURING INSPECTION		20 = NOT COMPLIANT 21 = PARTIALLY COMPLIANT		30 = UNSANITARY - BIOHAZARD 31 = UNSANITARY - OTHER		90 = OTHER		

INSPECTION CODES			INTERMEDIATE & PARAMEDIC SUPPLIES	INSPECTION CODES			PARAMEDIC SUPPLIES
E 01B	/		PORTABLE MEDICAL RADIO	P 01			DEFIBRILATOR / CARDIAC MONITOR
				P 02			DEFIBRILATOR ACCESSORIES
A 01	/		IV THERAPY EQUIPMENT	P 03			AMINOPHYLLINE: 2 AMP @ 10 OR 20ml
A 02	/		CATHETERS, SIZES 14G - 25G	P 04			ARAMINE: 2 VIALS @ 10ml
A 03	/		ADMINISTRATION SETS, MACRO / MICRO	P 05			ATROPINE SULFATE: 4 mg
A 04	/		VENOUS Tourniquets	P 06			BRETYLIUM TOSALATE: 50 mg/ml: 4 Amp @ 10ml
A 05	/		PADDED ARM BOARDS	P 07			CALCIUM CHLORIDE: 2gm
A 06	/		1" ADHESIVE TAPE OR EQUAL	P 08			DECADRON / HEXADOL: 20mg
A 07	/		ALCOHOL PREPS / ANTISEPTIC SWABS	P 09			D5W: 4 BAGS ANY SIZE
A 08	/		FLUIDS IN UNBREAKABLE CONTAINERS	P 10			D50W: 4 VIALS
A 09	/		D5W / LACTATED RINGERS / NS 9%	P 11			DIAZEPAM / VALIUM: PER PROTOCOL
A 10	/		NEEDLES, 18G - 21G, 1/2" - 2"	P 12			BENADRYL: 200mg
A 11	/		SYRINGES, 30cc & 50cc	P 13			DOBUTAMINE: 2 VIALS @ 20ml
A 12	X 21		VACUTAINER TUBES & NEEDLE SETS Q VAC. tube	P 14			EPINEPHRINE 1:1000: 2 AMPS
A 13	X 20		BLOOD LABELS Q	P 15			EPINEPHRINE 1:10,000: 4 PREFILLED SYRINGES
14	/		EOA / EGTA SET	P 16			LASIX: 200mg
A 15	/		30cc SYRINGE (EOA / EGTA)	P 17			DOPAMINE: 800mg
A 16	/		HEMOSTAT (EOA / EGTA)	P 18			ISUPREL: 4 VIALS
A 17	/		WATER SOLUBLE LUBRICANT (EOA / EGTA)	P 19			LACTATED RINGERS: 4 BAGS @ 1000ml
A 18	/		TRACH. TAPE OR EQUAL FOR 2 PATIENTS	P 20			LEVOPHED: 4 AMPS
A 19	/		LARYNGOSCOPE HANDLES(S) W/BATTERIES	P 21			LIDOCAINE HCL: 2 VIALS @ 2gm, 4 pf SYRINGES @ 100mg
A 20	/		ET TUBES, SIZES 6.0 - 9.0mm	P 22			MANNITOL: PER PROTOCOL
A 21	/		MAGIL FORCEPS	P 23			DEMEROL: PER PROTOCOL (SCH II)
A 22	/		STRAIGHT AND CURVED BLADES	P 24			MORPHINE SULFATE: PER PROTOCOL (SCH II)
A 23	/		SPARE BATTERIES & BULB	P 25			NARCAN: 4 AMP @ 1ml
A 24	/		STYLETTE, COPPER OR FLEXIBLE	P 26			NITROGLYCERINE: BOTTLE OR 6 UNIT DOSE TABS
A 25	/		PEDI LARYNGOSCOPE (OPTION I-LEVEL)	P 27			NORMAL SALINE: 4 BAGS, ANY SIZE (250, 500, 1,000 ml)
A 26	/		PEDI TUBES, SIZES 2.0 - 6.0mm	P 28			OXYTOCIN / PITOCIN: 40 UNITS
A 27	/		STRAIGHT & CURVED CHILD BLADE	P 29			PROCAINAMIDE: 500mg
A 28	/		STRAIGHT & CURVED INFANT BLADE	P 30			INDERAL: 5 AMPS @ 1ml
A 29	/		PNEUMATIC ANTI-SHOCK GARMENT	P 31			SODIUM BICARBONATE: 8 PF SYRINGES @ 50ml
A 30	/		PEDI PASG (OPTIONAL)	P 32			THIAMINE: 200mg
				P 33			VERAPAMIL: 4 AMPS @ 2ml
				P 34			ADDITIONAL MEDICATIONS PER REGIONAL PROTOCOL





MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH  
OFFICE OF EMERGENCY MEDICAL SERVICES  
AMBULANCE INSPECTION REPORT FORM - SERVICE

OBMS  
FORM  
500-24  
(8/96)

S

PAGE 5 OF 5

VEHICLE NUMBER <b>3928</b>		SERVICE NAME <b>Shirborn Fire Dept</b>		LICENSEE <b>Shirborn Fire</b>		DATE <b>02/10/97</b>	
ADDRESS <b>22 North Main St</b>		BUSINESS PHONE <b>508-651-7869</b>		INSPECTOR <b>ME</b>		OFFICE USE ONLY	
CITY/STATE/ZIP <b>Shirborn MA 01770</b>		MANAGER NAME <b>Kenneth Buckner Jr. Chief</b>		INSPECTOR SIGNATURE <b>John Dwyer</b>		CAPT.	
INSPECTION CODES 1 - COMPLIANT 20 - NOT COMPLIANT 30 - UNSANITARY - BIOHAZARD 90 - OTHER 11 - CORRECTED DURING INSPECTION 21 - PARTIALLY COMPLIANT 31 - UNSANITARY - OTHER							
INSPECTION CODES				WRITTEN POLICIES & PROCEDURES			
SERVICE OPERATIONS 170.200 ET SEQ				170.235			
S 01	1	LICENSURE		S 27	1	CERTIFICATION & RECERT OF PERSONNEL	
S 02	1	CERTIFICATION OF VEHICLES & PERSONNEL		S 28	1	RESPONSIBILITY TO RESPOND, TREAT & TRANSPORT	
S 03	1	STAFFING		S 29	1	DELIVERY OF PT. TO NEAREST APP. FACILITY	
S 04	1	INSURANCE		S 30	1	NON-DISCRIMINATION	
S 05	1	ADVERTISING		S 31	1	BACKUP SERVICES	
S 06	1	INCIDENT OR ACCIDENT REPORTS		S 32	1	USE OF BACKUP SERVICES	
S 07	1	DISPLAY OF LICENSE		S 33	1	DISPATCH	
S 08	1	RESPONSIBILITY TO DISPATCH, TREAT & TRANSPORT		S 34	1	COMMUNICATIONS	
S 09	1	PUBLIC ACCESS		S 35	1	STOCKING SUPPLIES	
S 10	1	DISPATCH COMMUNICATIONS		S 36	20	SANITARY PRACTICES	
S 11	1	MEDICAL COMMUNICATIONS		S 37	1	USE OF LIGHTS & WARNING SIGNALS	
S 12	1	AVAILABILITY & BACKUP		S 38	1	STAFFING OF AMBULANCES	
S 13	1	SPECIAL REQUIREMENTS TO OPERATE CLASS V		S 39	1	CONDUCT OF PERSONNEL	
S 14	1	HEATED GARAGE		S 40	1	MECHANICAL FAILURES	
S 15	1	STORAGE SPACE		S 41	20	INSPECTION AUTHORITIES	
S 16	21	SUPPLIES		S 42	1	TRANSPORT OF DEAD BODIES	
S 17	1	NON-DISCRIMINATION		S 43	1	PARENT RIGHTS	
S 18	21	AFFIRMATION AGREEMENT		S 44	1	PATIENT RESTRAINTS	
S 19	20	A&S PROCEDURES & POLICIES		S 45	1	DISPOSAL OF HAZARDOUS WASTE	
S 20	1	REGISTRATION W/ DIV. OF FOOD & DRUGS - 170.995		S 46	1	MANDATED REPORTING	
MA 0176236 10/31/97				S 47	1	INFECTION CONTROL PROCEDURES	
RECORDS 170.240				S 48	1	DESIGNATED INFECTION CONTROL OFFICER	
S 21	21	PERSONNEL		S 49	1	TRIP RECORDS LEFT @ RECEIVING FACILITIES	
S 22	21	PREVENTIVE MAINTENANCE		S 50	1	INFECTION CONTROL PROCEDURES	
S 23	1	VEHICLE REGISTRATION		S 51	20	MAINTENANCE OF DEFIBRILLATOR	
S 24	1	FAA CERTIFICATION (CLASS IV)		S 52	20	CONTROL & INSPECTION OF EPI-PENS	
S 25	1	LICENSES FOR PILOTS (CLASS IV)		two Manuals confusing & mixed together - hard for techs find items			
S 26	1	FCC LICENSES		Recommend TB testing			
S 27	21	TRIP RECORDS					
S 28	1	TRIP RECORDS LEFT @ RECEIVING FACILITY					





**Massachusetts Department of Public Health  
Office of Emergency Medical Services  
Ambulance Regulation Program  
PLAN OF CORRECTION**



Service Number  
**319128**

License Expiration Date  
**2/9/97**

Insp.  
**P. B.**

RESPONSE DUE BY:  
**2/24/97**

Service Name  
**Sherborn Fire Department**

VEHICLE INFORMATION (If Applicable)			
License Plate Number <b>FIRE 5253</b>		Is this vehicle a(n) <u>    </u> Addition <u>    </u> Replacement <u>X</u> Renewal	
		Ambulance Class <b>I</b>	Vehicle Unit Id <b>A-1</b>
Vehicle Identification Number		<b>1 F D K E 3 0 L 6 G H A 7 8 5 5 4</b>	
Page	Citation	Providers Plan of Correction (provide details of corrective action that satisfies reported deficiencies) (for page and citation number refer to inspection report form)	Completion Date
1	M01	3 <sup>rd</sup> strap cleaned	2/11/97
1	M38	Child size (infant) sphygmomanometer calibrated	2/14/97
2	V09	removed hook	2/23/97
2	V20	Replacing Ambulance ≈ 4/97	≈ 4/97
4	A12	Tubes placed in Ambulance	2/17/97
4	A13	Labels on the tubes	2/17/97
5	S16	Eye protection placed at filling site	2/23/97
5	S18	} All paperwork added & updated	4/1/97
5	S19		
5	S36		
5	S41		
5	S51		
5	S52		
5	S54		
Licensee representative's signature		Title <b>Captain</b>	Date <b>2/23/97</b>

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 13**  
**Fire Chief Neil McPherson's Deposition**

Neil McPherson

09/19/2006

Page 1

Volume: I  
Pages: 1-33  
Exhibits: 1

UNITED STATES DISTRICT COURT

DISTRICT OF MASSACHUSETTS

NO. 05-11454 RGS

----- x  
Joseph H. Koran, and Kimberly Koran, individually  
and on behalf of Ana Koran, Joseph Koran, Jr., and  
Erik Koran, minors,,  
Plaintiffs,

v.

Elizabeth Weaver and Town of Sherborn,  
Defendants.

----- x  
DEPOSITION OF NEIL MCPHERSON

Tuesday, September 19, 2006

2:40 p.m.

SHERBORN Fire Department

22 North Main Street

Sherborn, Massachusetts

Reporter: Lori-Ann London, RPR



Neil McPherson

09/19/2006

<p style="text-align: right;">Page 2</p> <p>1 APPEARANCES:</p> <p>2</p> <p>3 By Carmen L. Durso, Esquire and</p> <p>4 Matthew P. Coletti, Esquire</p> <p>5 LAW OFFICE OF CARMEN L. DURSO</p> <p>6 175 Federal Street</p> <p>7 Boston, Massachusetts 02110</p> <p>8 617.728.9123</p> <p>9 Appearing for the Plaintiffs</p> <p>10</p> <p>11 By Michael D. Leedberg, Esquire</p> <p>12 PIERCE, DAVIS &amp; PERRITANO, LLP</p> <p>13 Ten Winthrop Square</p> <p>14 Boston, Massachusetts 02110-1257</p> <p>15 617.350.0950</p> <p>16 Appearing for the Defendants</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p style="text-align: right;">Page 4</p> <p>1 PROCEEDINGS</p> <p>2</p> <p>3 NEIL McPHERSON,</p> <p>4 a witness called for examination by the</p> <p>5 Plaintiffs, having been satisfactorily identified</p> <p>6 by the production of his Massachusetts driver's</p> <p>7 license, and duly sworn by the Notary Public, was</p> <p>8 examined and testified as follows:</p> <p>9 EXAMINATION</p> <p>10 BY MR. DURSO:</p> <p>11 Q State your name for the record, please.</p> <p>12 A Neil McPherson.</p> <p>13 Q Okay. And what's your present address?</p> <p>14 A 9 Great Rock Road in Sherborn 01770.</p> <p>15 Q What's your date of birth?</p> <p>16 A 7/15/65.</p> <p>17 Q Okay. This is a deposition. Have you</p> <p>18 done one of these before?</p> <p>19 A I have, yeah.</p> <p>20 Q Okay. A lot?</p> <p>21 A Not a lot but I've done a few.</p> <p>22 Q You know the rules about not talking</p> <p>23 while the other person's talking and all that good</p> <p>24 stuff so the stenographer can take everything</p>
<p style="text-align: right;">Page 3</p> <p>1 INDEX</p> <p>2</p> <p>3 DEPOSITION OF: PAGE</p> <p>4 NEIL McPHERSON</p> <p>5</p> <p>6 EXAMINATION BY MR. DURSO 4</p> <p>7 X</p> <p>8 EXHIBITS</p> <p>9 NO. PAGE</p> <p>10 1 Memo from Deputy Chief Buckler 27</p> <p>11</p> <p>12</p> <p>13</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18 *Original exhibits retained by Mr. Durso</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p>	<p style="text-align: right;">Page 5</p> <p>1 down?</p> <p>2 A Yes.</p> <p>3 Q Are you a high school graduate?</p> <p>4 A Yes.</p> <p>5 Q What high school, what year?</p> <p>6 A Dover Sherborn, '83; Babson College,</p> <p>7 '87.</p> <p>8 Q '83. Babson --</p> <p>9 A Um-hm.</p> <p>10 Q -- '87. What was your degree in?</p> <p>11 A BA.</p> <p>12 Q In....</p> <p>13 A Business administration, minor in</p> <p>14 finance. So that's how I end up in the fire</p> <p>15 service, makes sense, right?</p> <p>16 Q Did you have any further schooling after</p> <p>17 Babson?</p> <p>18 A I mean, nothing -- no formal schooling</p> <p>19 in terms of college. Obviously continuing</p> <p>20 education classes and certifications in the fire</p> <p>21 service.</p> <p>22 Q Okay. We'll get to those in a second.</p> <p>23 Any military service?</p> <p>24 A No.</p>

2 (Pages 2 to 5)

Neil McPherson

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<p>1 Q Tell me about your licenses and 2 certifications. 3 A Just relative to the fire service, fire 4 fighter one, two certified, fire officer one, fire 5 instructor one. 6 Q Slow down just a little bit. Fire 7 fighter one, two? 8 A I thought you get paid by the hour. 9 MR. DURSO: He gets paid by the 10 hour, I don't. 11 MR. LEEDBERG: Yeah, so slow down. 12 THE WITNESS: You're right. 13 Q Fire fighter one, two? 14 A Yeah. 15 Q And what was the second thing you said? 16 A Fire officer one. 17 Q Yeah. 18 A Fire instructor one. 19 Q Yeah. 20 A EMT. 21 Q Yeah. 22 A Those are the major ones. 23 Q Okay. Do all fire fighters get the fire 24 1, 2 training you're talking about?</p>	<p>1 second. Tell me a bit about your work history 2 post high school, post college? 3 A As it relates to the fire service? 4 Q No, just in general. 5 A Since I graduated from Babson, I also 6 work for Chubb Insurance. I'm a zone manager for 7 them right now. 8 Q What do you do as zone manager? 9 A Oversee about 45 appraisers throughout 10 the Northeast who go out and view properties for 11 Chubb in their personal lines department. 12 Q Okay. From when to when did you work 13 for Chubb? 14 A '87 to present. 15 Q Okay. And you -- you became chief in 16 2002. Did you have a relationship with the 17 department prior to that? 18 A Yeah. 19 Q For how long? 20 A I started in 1989 in the department. 21 Before I became chief, I was a deputy chief for a 22 year and a half; before that I was a lieutenant 23 for about two years; and those are rough time 24 frames.</p>
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<p>1 A No, not all fire fighters do. 2 Q Okay. What's -- is that the basic fire 3 fighting instruction, one and two? 4 A One and two is basic fire fighting 5 instruction so that -- it's the same level of 6 training and certification you would get if you 7 went to the department of fire services, the fire 8 academy up in Stowe. 9 Q Okay. 10 A Level one is for you to operate -- 11 understand the basic principles, and two is really 12 to give you a solid understanding of fire fighting 13 skills so you can operate independently. The fire 14 officer, of course, is for supervising people, 15 instructor is for teaching people. 16 Q Okay. All right. And how did you 17 become chief? 18 A Well, somebody suckered me into it. No. 19 Obviously when the job came up, I applied for the 20 job, along with a few other people, and was 21 selected in December of 2002. So I was only been 22 in this job for three months when this accident 23 occurred. 24 Q Okay. We'll get to that in just a</p>	<p>1 Q Okay. When did you get your EMT 2 certification? 3 A Boy, a long time ago. I don't remember 4 the year. 5 Q Do you keep it up? 6 A Yeah, of course. 7 Q What are we talking, 10 years ago, 15 8 years ago? 9 A It had to be probably '92, somewhere 10 around there. I'm only 21. 11 Q This is a call fire department? 12 A That is correct. 13 Q And the -- if you can just sort of 14 explain to me the structure of the ambulance 15 service in a general way. 16 MR. LEEDBERG: Object as to form. 17 Answer that if you can. 18 A Very simply the structure of the fire 19 department, the ambulance falls underneath the 20 fire department. There is a chief, there is a 21 deputy chief, there is a captain of EMS, a captain 22 of inspections, a captain on the fire side. 23 When it comes to the ambulance 24 specifically, there is an EMS lieutenant who</p>

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1 reports to the EMS captain. There are lieutenants  
2 for each of the engines who report to the fire  
3 captain. We have a training officer and we have a  
4 training committee. Fire fighters report directly  
5 to their lieutenants. They go up the chain of  
6 command as the need arises.

7 Q Okay. In 2002, 2003 who were the EMS  
8 captain and lieutenant?

9 A 2002 the structure was slightly  
10 different back then. You had Ronny Buckler who's  
11 a deputy chief, okay, of what they called squad  
12 one, all right, and then you had myself, who was  
13 the other deputy chief at that point for the fire  
14 side. So Ronny was responsible for EMS and the  
15 inspections.

16 Q Okay. Was there a lieutenant at that  
17 time?

18 A There was. John Dowse was the captain,  
19 and he's now deputy chief, and I believe at that  
20 point in time it was I believe Pam Dowse. Yeah,  
21 it was Pam Dowse. Although, I will definitely  
22 check that for you.

23 Q Okay. In the beginning of 2003 there  
24 was a single ambulance which is referred to as A1;

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1 out. And I'm just trying to think exactly. I  
2 believe actually I was made aware of it the  
3 following day, the following morning, when I got a  
4 phone call from John Dowse.

5 Q Okay. Would you tell me what he told  
6 you, as best you can remember?

7 A I believe he said that there was a  
8 problem with the stretcher and that he was calling  
9 for service that day.

10 Q Okay. This is a small department?

11 A Yeah.

12 Q You've got one stretcher. What happens  
13 if you can't use your stretcher; do you have a  
14 spare or --

15 A We do not, no.

16 Q So what do you do?

17 A We'll call -- if we don't have a  
18 stretcher that is working, we'll call mutual aid.

19 Q Oh, okay.

20 A So we'll call another ambulance from  
21 another town and dispatch our engine downstairs.

22 Q Okay. So John Dowse calls you and he  
23 tells you there's a problem, and essentially that  
24 he's going to deal with it?

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1 is that correct?

2 A That is correct.

3 Q Okay. And the A1 ambulance would have  
4 had one stretcher?

5 A Correct.

6 Q Okay. Are you familiar with that  
7 stretcher?

8 A Yeah.

9 Q I show you what was marked Exhibit 4 in  
10 the Christensen deposition. Is that the stretcher  
11 and the model?

12 (Document exhibited to witness.)

13 (Witness perusing document.)

14 A It appears to be.

15 Q Okay. How did you -- I'm sorry, you can  
16 continue looking through that if you need to.

17 A It's fine.

18 Q How did you first become aware that  
19 something happened to Mr. Koran on February 6,  
20 2003?

21 MR. LEEDBERG: Object as to form.  
22 You can go ahead and answer that if you can.

23 A How did I become first aware. We were  
24 here at a drill that night when the ambulance went

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1 A That is correct.

2 Q Okay. What do you do after that?

3 A What do I do?

4 Q Yes.

5 A Again, I'm going to let him deal with  
6 that, and he usually reports back in a timely  
7 fashion as to how the problem has been resolved or  
8 if he needs my help or intervention.

9 Q Orally, he reports orally?

10 A Yes.

11 Q What is the paperwork that the incident  
12 generates?

13 A There should be an equipment failure  
14 form, which I believe you have.

15 (Document exhibited to witness.)

16 Q I show you what is marked Exhibit 2 in  
17 the Christensen deposition. Is that the document  
18 you refer to?

19 (Witness perusing document.)

20 A Yes.

21 Q Okay. Is there any other paperwork  
22 that's generated besides that document?

23 A There's no formal paperwork, no.

24 Q Okay. When you talk to someone in the

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1 department, they talk to you, is there any  
2 documentation of the conversations either in terms  
3 of creating a piece of paper or making entries in  
4 computers or anything like that?

5 A No.

6 Q Has -- to your knowledge, has this  
7 particular incident resulted in the generation of  
8 any additional documentation?

9 A Not to my knowledge, no.

10 Q Okay. I got -- I've got a bunch of  
11 stuff that was provided to me -- you're familiar  
12 with these ambulance checklists?

13 A Yes.

14 Q That's something that's done on a  
15 periodic basis?

16 A Um-hm.

17 Q What's the period?

18 A I'd like to say it's a formalized  
19 process, but it's rather we try and do it every  
20 few weeks, once a month. In some cases it's  
21 formally written down like this, in other cases  
22 it's not formally written down.

23 Q I got a bunch of these things covering  
24 several years, and there was a gap from

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1 answer the question.

2 A I just say to you that all the  
3 information that we have has been provided to you.  
4 I do understand that this information was provided  
5 this morning, when I was, you know, sharing some  
6 of the information I had, and I had just pulled it  
7 last night from the pile of stuff. So I assumed  
8 you had gotten that and apparently you did not.

9 Q I got it today, and I'm not trying to  
10 find fault here --

11 A Yeah.

12 Q -- but I know that sometimes what  
13 happens is that when there's something going on  
14 people pull stuff out and put it in a special  
15 file --

16 A Right.

17 Q -- so they'll be able to put their hands  
18 on it quickly --

19 A Yeah.

20 Q -- as opposed to going through  
21 everything. So my question is, might that have  
22 happened here? Because it struck me when I was  
23 looking at these ambulance checklist forms that  
24 after -- this is February 2nd, this last one --

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1 January 25th, 2003 to April 30th, 2003. There  
2 were no documents provided in that time frame.  
3 Today counsel provided me with additional  
4 documents and I got a February 2, 2003 --

5 A Um-hm.

6 Q -- checklist, and the next date after  
7 that is March 7th.

8 A Um-hm.

9 Q Looking at these forms, it seems as  
10 though they are prepared, approximately, I don't  
11 know, a couple of times a month anyway, sometimes  
12 it looks like it's weekly, but it varies. So I'm  
13 wondering if as a result of an incident like this  
14 that the ambulance checklist for the relevant  
15 period would have been pulled out of the regular  
16 records and put somewhere else, sent to a  
17 litigation file, sent to town counsel or anything  
18 like that, or sent to insurers or risk managers?

19 MR. LEEDBERG: I'm going to object  
20 just to say be careful about any communications  
21 you might have with counsel or with myself in any  
22 respect.

23 THE WITNESS: Sure.

24 MR. LEEDBERG: But other than that,

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1 after February 6th, probably the next time that  
2 there was a checklist, the checklist makes note of  
3 the fact that stretcher with cot, which is the  
4 first item on all these checklists, is maybe not  
5 there and not available. So that's why I'm asking  
6 about it, and see if you can shed any light on  
7 that.

8 A Again, I have held the file for this  
9 case, and there is nothing in there, again, that  
10 you do not have.

11 Q Okay. That's fine.

12 So John Dowse notifies you about the  
13 problem, and that's the first time you hear about  
14 it.

15 A Um-hm.

16 Q And when is the next -- what's the next  
17 thing that you hear?

18 A I don't frankly recall exactly the order  
19 of the events.

20 Q Okay. What's the next thing you  
21 remember, whether it's in order or not?

22 A I do remember I think getting a phone  
23 call from Mr. Koran, all right, calling up and  
24 claiming that there was some type of situation

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1 that happened, and he was looking for some -- a  
 2 run report.  
 3 Q Okay.  
 4 A I don't remember exactly what the time  
 5 frame was, how many days out that was. I do know  
 6 for a fact, though, that, again, after that  
 7 stretcher was repaired, that I was notified it was  
 8 repaired, because when we make a repair like that  
 9 we have to take our ambulance out of service, as I  
 10 mentioned before, and depend upon mutual aid.  
 11 Q Okay. So the ambulance was out of  
 12 service for a period of time?  
 13 A As we took the part down, I'm sure --  
 14 again, I was not part of this. I would assume  
 15 when it was taken -- a part was taken to the  
 16 highway department to be repaired. The answer  
 17 would be yes.  
 18 Q Okay. Well, let's back up for a second.  
 19 When did the highway department get  
 20 involved in this and how?  
 21 A The town mechanic does all the repair  
 22 work -- most of the repair work for our vehicles  
 23 and equipment.  
 24 Q Okay. Who's the town mechanic or who

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1 was it then?  
 2 A Warren Donnelly.  
 3 THE WITNESS: Common spelling.  
 4 THE STENOGRAPHER: Which is the  
 5 common spelling?  
 6 THE WITNESS: D-O-N-N-E-L-L-Y.  
 7 (Discussion off the record.)  
 8 Q Is Mr. Donnelly still the town mechanic?  
 9 A Yes.  
 10 Q In order for Mr. Donnelly to do whatever  
 11 he did, what paperwork is generated?  
 12 A Just, again, the form you see in front  
 13 of you and John bringing the issue to him.  
 14 There's no other additional paperwork.  
 15 Q No work order of any kind or anything  
 16 like that?  
 17 A In this case, no.  
 18 Q Okay. So John Dowse got Warren Donnelly  
 19 to do whatever he did?  
 20 A That is correct.  
 21 Q Okay. How did -- how did Warren know  
 22 what to do?  
 23 A I wasn't there, so I really can't tell  
 24 you. Again, John Dowse handled the repair of this

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1 stretcher or that piece I should say.  
 2 Q Okay. Did John ever tell you what the  
 3 problem was and why there had to be a repair made?  
 4 A The only thing that he said is that,  
 5 No. 1, he wasn't sure a hundred percent what the  
 6 issue was, but he noticed that the handle was bent  
 7 and that EMSAR had been called to ensure --  
 8 THE STENOGRAPHER: That who had been  
 9 called?  
 10 THE WITNESS: E-M-S-A-R, EMSAR.  
 11 Q And you said EMSAR was called?  
 12 A That is correct. And I believe you have  
 13 a work order in front of you for the inspection of  
 14 that stretcher.  
 15 Q Yeah. So did -- at what point in the  
 16 process does EMSAR do their inspection, before or  
 17 after the repairs are made by Warren Donnelly?  
 18 A That's a great question. I don't know.  
 19 Q Okay. Is John Dowse the guy who would  
 20 most likely know the answer to these questions?  
 21 A That is correct.  
 22 Q Yeah. Okay. All right. So John has  
 23 the town mechanic work on it; he tells you that it  
 24 is something to do with the handle being bent; and

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1 at some point did Warren Donnelly, as far as you  
 2 know, complete the repair work?  
 3 A The repair work that he did -- I want to  
 4 be very specific -- was related to the handle, all  
 5 right, I do know that for a fact.  
 6 Q Yeah.  
 7 A So relative to the work, again, I do  
 8 know, not how it happened, but rather that he did  
 9 straighten out the handle.  
 10 Q Okay. And did EMSAR then inspect it?  
 11 A That's the piece, the time frame, I  
 12 don't recall, but the order was there.  
 13 Q In order for this equipment to go back  
 14 into service, did someone have to inspect it and  
 15 certify it in some way?  
 16 A Before it went back in the ambulance?  
 17 Q Yeah.  
 18 A It was checked for operation by John  
 19 Dowse. It would not have been put back in service  
 20 if we felt it was not operating properly. Having  
 21 said that, as a, you know, mechanism, I'm not -- a  
 22 double-checking mechanism, I know that we called  
 23 EMSAR to make sure that it was, in fact, operated  
 24 and a technician looked at that. We are not

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<p>1 technicians.</p> <p>2 Q Right. But my question is, is that</p> <p>3 what's required under the regulations, that the</p> <p>4 technician come in and certify that it's operating</p> <p>5 properly?</p> <p>6 MR. LEEDBERG: Object as to form.</p> <p>7 Answer if you know.</p> <p>8 A I don't believe there's any regulations</p> <p>9 that clearly state that.</p> <p>10 Q Okay. DPH is the certifying agency for</p> <p>11 all of this stuff; is that right?</p> <p>12 A That is correct.</p> <p>13 Q Okay. In any event, at some point, and</p> <p>14 apparently by -- by March 7th, 2003, at that point</p> <p>15 there's a form indicating that the ambulance is --</p> <p>16 I assume the check mark means it's all okay?</p> <p>17 A That is correct.</p> <p>18 Q So is it likely the ambulance was out of</p> <p>19 service between February 6 and March 7th of 2003?</p> <p>20 A For a period of time, it's likely, yes.</p> <p>21 Q Well, it can't operate at all without</p> <p>22 the stretcher, right?</p> <p>23 A That is correct.</p> <p>24 Q Okay. So, I mean, maybe that's the</p>	<p>1 A That I believe, again, the next day,</p> <p>2 that when John took the part to the highway</p> <p>3 department it probably was less than an hour, but</p> <p>4 I do not know a hundred percent. John will have</p> <p>5 to be asked that question.</p> <p>6 Q Okay. And then was it put back in</p> <p>7 service before the EMSAR person inspected it?</p> <p>8 A Again, as I said before, I'm not quite</p> <p>9 sure of the timing as to EMSAR and as to Warren</p> <p>10 looking at this.</p> <p>11 Q Okay. So I need to ask John these</p> <p>12 questions?</p> <p>13 A That is correct.</p> <p>14 Q Okay. Aside from your counsel, with --</p> <p>15 with what other persons have you ever discussed</p> <p>16 this incident or the -- the problems relating to</p> <p>17 the stretcher?</p> <p>18 A I mean, obviously, I had a conversation</p> <p>19 with Scott, Dominick, the captain, and the deputy</p> <p>20 to certainly try and gather information and facts.</p> <p>21 John and I have talked about the process as it</p> <p>22 relates to this department and the requirements of</p> <p>23 members of this department, and that's the</p> <p>24 majority of the conversation that we've had.</p>
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<p>1 explanation of why there's no ambulance checklist</p> <p>2 in between those two time periods, but if so,</p> <p>3 would there be any other document generated for</p> <p>4 the time period that the ambulance was out of</p> <p>5 service? Would you have had to have written</p> <p>6 something for mutual aid or --</p> <p>7 A No.</p> <p>8 MR. LEEDBERG: Objection as to form.</p> <p>9 Go ahead.</p> <p>10 A We'd make a simple call to dispatch,</p> <p>11 tell them we're going to have the ambulance out of</p> <p>12 service for 15, 20 minutes, whatever it may be,</p> <p>13 and then the officer in charge, if a call comes</p> <p>14 in, will make the determination as to what the</p> <p>15 response will be. So there's no formal</p> <p>16 documentation to answer your question.</p> <p>17 Q You're talking 15 or 20 minutes. We're</p> <p>18 talking about maybe a week or two?</p> <p>19 A The ambulance was clearly not out of</p> <p>20 service for a week or two.</p> <p>21 Q Okay. How long do you think it was out</p> <p>22 of service?</p> <p>23 A Again, this is me speculating.</p> <p>24 Q Yeah.</p>	<p>1 Q Okay. Dominick indicated in his</p> <p>2 testimony that he believes he sent a -- an e-mail,</p> <p>3 and he believes he sent it to Pam Dowse. Is there</p> <p>4 a departmental e-mail service of some sort?</p> <p>5 A At this point in time, no. In fact, we</p> <p>6 just got that last year.</p> <p>7 Q So in 2003, if he sent -- if -- if -- he</p> <p>8 said he wrote an addendum to his report which</p> <p>9 indicated what happened and sent it to Pam Dowse.</p> <p>10 If he sent it to Pam Dowse, would it have been a</p> <p>11 personal e-mail that it would have gone to?</p> <p>12 A Yes.</p> <p>13 Q Okay. What's the relationship between</p> <p>14 Pam Dowse and John Dowse?</p> <p>15 A Husband and wife.</p> <p>16 Q Okay. They share an e-mail, do you</p> <p>17 know, or did they?</p> <p>18 A I don't really know.</p> <p>19 Q Did you ever see Dominick Tolson's</p> <p>20 e-mail?</p> <p>21 A I don't -- I don't believe so.</p> <p>22 Q Aside from the document that's marked</p> <p>23 Exhibit 2 in the Christensen deposition and the</p> <p>24 trip sheet, which is marked Exhibit 1 in the</p>

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<p style="text-align: right;">Page 26</p> <p>1 Christensen deposition --</p> <p>2 (Documents exhibited to witness.)</p> <p>3 Q -- are you aware of any other documents</p> <p>4 which contain information about the malfunction of</p> <p>5 the stretcher?</p> <p>6 A I'm just trying to think. Relative to</p> <p>7 the malfunction. I don't believe so. I don't</p> <p>8 believe so, no. No.</p> <p>9 Q Okay, the -- did anyone ever write</p> <p>10 anything which was an explanation of what it was</p> <p>11 that went wrong?</p> <p>12 A Ronny Buckler, and I believe you guys</p> <p>13 have that as a point of correction, wrote a brief</p> <p>14 memo.</p> <p>15 THE WITNESS: Which I think you</p> <p>16 have.</p> <p>17 MR. LEEDBERG: I don't know whether</p> <p>18 we disclosed that or not. Do you have a memo from</p> <p>19 Buckler in your file? That may have been</p> <p>20 privileged.</p> <p>21 A Okay. That's the one memo I do have</p> <p>22 that kind of gives a brief overview of the events</p> <p>23 that night, as he was the senior officer on</p> <p>24 scene --</p>	<p style="text-align: right;">Page 28</p> <p>1 writing with respect to what it was that caused</p> <p>2 the stretcher to malfunction?</p> <p>3 A No.</p> <p>4 Q Did anyone other than what you've told</p> <p>5 me that -- about John Dowse having Warren Donnelly</p> <p>6 make a repair on the bent handle, other than that,</p> <p>7 did anyone ever tell you what it was that</p> <p>8 malfunctioned, even if it didn't end up in a</p> <p>9 written document?</p> <p>10 A No.</p> <p>11 Q Was there ever any explanation as to how</p> <p>12 the handle got bent?</p> <p>13 A No.</p> <p>14 (Document exhibited to witness.)</p> <p>15 Q And I'm showing you page 7 of Exhibit 4</p> <p>16 from the Christensen deposition, and I want to</p> <p>17 point to the object which says "auxillary lock."</p> <p>18 Do you see that?</p> <p>19 A Yes.</p> <p>20 Q Is that what we're talking about when we</p> <p>21 talk about the handle being bent?</p> <p>22 A I believe so.</p> <p>23 Q Okay. And is it your understanding that</p> <p>24 in order for the legs to stay in the down locked</p>
<p style="text-align: right;">Page 27</p> <p>1 Q Okay.</p> <p>2 A -- which I requested from him.</p> <p>3 MR. DURSO: Yeah. I haven't seen</p> <p>4 that. Is that something you're gonna disclose</p> <p>5 or --</p> <p>6 MR. LEEDBERG: I can't imagine why</p> <p>7 we would have thought it was privileged. We can</p> <p>8 revisit it. Why don't we, you know, keep going</p> <p>9 unless you want to take five right now, I'll look</p> <p>10 at the memo and make a determination.</p> <p>11 MR. DURSO: Well, yeah, because, I</p> <p>12 mean, I might have a few more questions, because</p> <p>13 basically I'm done otherwise, aside from that.</p> <p>14 MR. LEEDBERG: Okay. Why don't we</p> <p>15 go off the record. Let me take a look at it.</p> <p>16 (Off record.)</p> <p>17 (Document marked as Exhibit No. 1.)</p> <p>18 MR. DURSO: Back on the record.</p> <p>19 Q Okay, Chief, you've given me a document</p> <p>20 which we've marked Exhibit 1, which was a memo</p> <p>21 from Deputy Chief Buckler to you with regard to</p> <p>22 the -- the incident the night -- the night of the</p> <p>23 incident, which was February 6, 2003.</p> <p>24 Did anyone ever give you anything in</p>	<p style="text-align: right;">Page 29</p> <p>1 position that that -- that handle has to click</p> <p>2 into a position when the legs are dropped?</p> <p>3 MR. LEEDBERG: I'm going to object</p> <p>4 as to form. Answer if you can.</p> <p>5 A I believe -- again, I'm not an engineer</p> <p>6 by any means here -- that locking mechanism is</p> <p>7 typically to unlock the legs when you put it into</p> <p>8 the back of the ambulance. I am -- again, I don't</p> <p>9 know if the handles over here -- I don't know.</p> <p>10 I'm not sure.</p> <p>11 Q Okay. Well, if you have to unlock that</p> <p>12 in order to fold the legs, then it must be in a</p> <p>13 locked position when the legs are down, logically?</p> <p>14 A But it's not something that we have to</p> <p>15 manually do. That is something that typically --</p> <p>16 again, I think it automatically resets itself, I</p> <p>17 believe.</p> <p>18 Q Yeah, into a locked position when the</p> <p>19 legs are down; is that right?</p> <p>20 A I can't say if it's -- if that means</p> <p>21 it's in the locked position or not.</p> <p>22 Q All right. In any event, that appears</p> <p>23 to have been the handle that was bent and is</p> <p>24 somehow involved in the malfunction; is that</p>

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Neil McPherson

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<div>Page 30</div> <div><div>1 correct; is that your understanding?</div><div>2 MR. LEEDBERG: Objection as to form.</div><div>3 A I would say to you, again, John Dowse is</div><div>4 the person who specifically dealt with this.</div><div>5 Q Okay.</div><div>6 A It is my impression, but I am not the</div><div>7 one who made that repair, okay, or was involved</div><div>8 necessarily with the corrective action.</div><div>9 Q Okay. All right. Are there any other</div><div>10 documents --</div><div>11 A No.</div><div>12 Q -- of any kind that -- you've got to let</div><div>13 me finish the question.</div><div>14 A I'm sorry.</div><div>15 Q Are there any other documents of any</div><div>16 kind that relate to this incident which are being</div><div>17 withheld on a claim of privilege at this time, do</div><div>18 you know?</div><div>19 MR. LEEDBERG: I'm going to object</div><div>20 to that question. Answer it if you know it.</div><div>21 A I don't believe so.</div><div>22 Q Okay.</div><div>23 MR. DURSO: Okay. Anything else?</div><div>24 MR. COLETTI: I think you've been</div></div>	<div>Page 32</div> <div><div>1 CERTIFICATE</div><div>2 COMMONWEALTH OF MASSACHUSETTS</div><div>3 BRISTOL, SS</div><div>4</div><div>5 I, Lori-Ann London, Registered</div><div>6 Professional Reporter and Notary Public in and for</div><div>7 the Commonwealth of Massachusetts, do hereby</div><div>8 certify:</div><div>9 That, NEIL McPHERSON, the witness</div><div>10 whose deposition is hereinbefore set forth, was</div><div>11 duly sworn by me and that such deposition is a</div><div>12 true record of the testimony given by the witness</div><div>13 to the best of my knowledge, skill, and ability.</div><div>14 I further certify that I am neither</div><div>15 related to, nor employed by, any of the parties in</div><div>16 or counsel to this action, nor am I financially</div><div>17 interested in the outcome of this action.</div><div>18 IN WITNESS WHEREOF, I have hereunto set</div><div>19 my hand and seal of office this 2nd day of October</div><div>20 2006.</div><div>21</div><div>22 <div>Lori-Ann London, RPR</div></div><div>23 <div>Notary Public</div></div><div>24 My commission expires: 6/15/2012</div></div>																																	
<div>Page 31</div> <div><div>1 thorough.</div><div>2 MR. DURSO: Thank you.</div><div>3 MR. LEEDBERG: I'm just going to say</div><div>4 on the record that the memorandum that we</div><div>5 disclosed, I'm not sure if we disclosed it or not.</div><div>6 There seems to be an argument for a prepared in</div><div>7 anticipation of litigation privilege, but after</div><div>8 consulting with my client, we decided we'd</div><div>9 disclose this one memorandum and waive the</div><div>10 communication as to this memorandum only, and we</div><div>11 will not be waiving any other communications as</div><div>12 far as the investigation for litigation.</div><div>13 MR. DURSO: Okay. Thank you.</div><div>14 Appreciate that. All right, I think we're done.</div><div>15 (Off record at 3:25 p.m.)</div><div>16</div><div>17</div><div>18</div><div>19</div><div>20</div><div>21</div><div>22</div><div>23</div><div>24</div></div>	<div>Page 33</div> <div><div>1 ERRATA SHEET</div><div>2 I, NEIL McPHERSON, the within-named</div><div>3 deponent do hereby certify that I have read the</div><div>4 foregoing transcript of my testimony, and further</div><div>5 certify that said transcript is a true and</div><div>6 accurate record of said testimony (with the</div><div>7 exception of the following corrections listed</div><div>8 below):</div><div>9 <table><tr><th>Page</th><th>Line</th><th>Correction</th></tr><tr><td>10</td><td></td><td></td></tr><tr><td>11</td><td></td><td></td></tr><tr><td>12</td><td></td><td></td></tr><tr><td>13</td><td></td><td></td></tr><tr><td>14</td><td></td><td></td></tr><tr><td>15</td><td></td><td></td></tr><tr><td>16</td><td></td><td></td></tr><tr><td>17</td><td></td><td></td></tr><tr><td>18</td><td></td><td></td></tr><tr><td>19</td><td></td><td></td></tr></table></div><div>20 Signed under the pains and penalties of</div><div>21 perjury this day of , 2006.</div><div>22</div><div>23</div><div>24 <div>NEIL McPHERSON</div></div></div>	Page	Line	Correction	10			11			12			13			14			15			16			17			18			19		
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**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 14**  
**Sherborn Fire & Rescue Call Response Log**  
**(1/1/03-3/1/03)**



Fire and EMS Combined List by Incident Number

Alarm Date Between {01/01/2003} And {03/01/2003}

Incident	Type	Date	Location	Description
03-0000036-0	FIRE	01/23/2003	84 Harrington Ridge RD	600 Good intent call, Other
03-0000037-1	EMS	01/23/2003	Police Station	Allergic Reaction
03-0000038-0	FIRE	01/25/2003	206 Woodland ST	700 False alarm or false
03-0000039-0	FIRE	01/27/2003	27 Deerfield RD	600 Good intent call, Other
03-0000040-1	EMS	01/27/2003	Western & Maple	MVA
03-0000040-2	EMS	01/27/2003	Western & Maple	MVA
03-0000040-0	FIRE	01/27/2003	Washington ST & Maple ST	322 Motor vehicle accident
03-0000041-0	FIRE	01/27/2003	60 Washington ST	730 System malfunction,
03-0000042-1	EMS	01/28/2003	Mill/Pond and Speen	MVA
03-0000043-1	EMS	01/28/2003	39 Brush Hill RD	ME
03-0000044-1	EMS	01/29/2003	25 Page Farm RD	ME
03-0000045-1	EMS	01/29/2003	2 N Main ST	ME
03-0000046-0	FIRE	01/29/2003	Pine hill LA	444 Power line down
03-0000047-1	EMS	01/31/2003	182 West Central Street, Natick	ME
03-0000048-1	EMS	01/31/2003	39 Brush Hill RD	ME
03-0000049-1	EMS	01/31/2003	5 Apple ST	ME
03-0000050-0	EMS	02/01/2003	Washington and Woodland	MVA
03-0000051-1	EMS	02/02/2003	147 N Main ST	MVA
03-0000052-1	EMS	02/02/2003	39 Brush Hill RD	fell off horse
03-0000053-0	FIRE	02/03/2003	27 Parks DR	114 Chimney or flue fire,
03-0000054-1	EMS	02/03/2003	121 Bogastow Brook RD	ME - Blau / Luvic / C-1 see list
03-0000055-0	FIRE	02/03/2003	12 Ames DR	500 Service Call, other
03-0000056-0	EMS	02/04/2003	Nason Hill and Mill	MVA - Waver
03-0000057-0	EMS	02/05/2003	26 N Main ST	MVA - Waver
03-0000058-1	EMS	02/05/2003	50 Cedar Ave Apt A - Natick	Medical J.P. / Luvic / C-1
03-0000059-1	EMS	02/06/2003	33 N Main ST	Medical - Waver
03-0000060-0	FIRE	02/07/2003	Farm RD & Forest ST	322 Motor vehicle accident
03-0000061-0	EMS	02/07/2003	W Goulding ST & Woodland ST	M.V.A.
03-0000062-1	EMS	02/07/2003	150 N Main ST	MVA
03-0000062-0	FIRE	02/07/2003	North main at laurel Farms	322 Motor vehicle accident
03-0000063-0	FIRE	02/07/2003	N Main ST /Laurel Farms	322 Motor vehicle accident
03-0000064-1	EMS	02/07/2003	N Main ST /Laurel Farms	MVA
03-0000064-2	EMS	02/07/2003	N Main ST /Laurel Farms	MVA
03-0000065-1	EMS	02/08/2003	63 South Main ST	ME
03-0000066-0	FIRE	02/08/2003	Bullard Street near Millis Town	700 False alarm or false
03-0000067-0	FIRE	02/09/2003	93 Eliot ST	551 Assist police or other
03-0000068-0	EMS	02/09/2003	234 Western AVE	ME - Animal Attack
03-0000069-0	EMS	02/10/2003	Washington and Maple	MVA
03-0000070-0	EMS	02/13/2003	506 Concord St	ME

**MOTION FOR SUMMARY JUDGMENT**  
**EXHIBIT 15**  
**Plaintiff Erik Koran's Answers to**  
**Interrogatories**

UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MASSACHUSETTS

JOSEPH H. KORAN, and KIMBERLY )  
KORAN, Individually and on Behalf of )  
ANA KORAN, JOSEPH KORAN, JR. )  
and ERIK KORAN, Minors, )  
Plaintiffs )

C. A. No. 05-11454-RGS

v. )

ELIZABETH WEAVER, and )  
TOWN OF SHERBORN, )  
Defendants )

**PLAINTIFF ERIK KORAN'S ANSWERS TO DEFENDANT  
TOWN OF SHERBORN'S FIRST SET OF INTERROGATORIES**

**INTERROGATORY 1.** Please Identify Yourself, giving Your full name, age, residential address and school name and address.

**ANSWER:** Erik Dylan Koran, D.O.B. 10/20/04, 6101 Twain Drive, New Market, MD 21774.

2. Describe Your relationship to all of the Plaintiffs in this case.

**ANSWER:** Joseph and Kimberly Koran are Erik's parents. Joseph Albert and Ana are his siblings.

**INTERROGATORY 3.** Describe each and every way in which you contend that the Incident affected Your relationship with Plaintiff Joseph H. Koran, and/or the society, services or affection from the Plaintiff, Joseph H. Koran.

**ANSWER:** Erik was born after the accident at issue. Joseph Koran was able to pick him up and hold him when he was first born, but has never been able to get down on the floor to change his diaper, or to horse around with him or give him a piggy-back. They have not been able to go on walks together, or go to the playground together.

**INTERROGATORY 4.** Describe how You first learned about the Incident, Identifying all Communications by date and time, medium used, Persons present, Documents evidencing the Communication, if any, and a verbatim of the Communication.

**ANSWER:** I am not sure Erik knows specifically about the accident at issue. He does know,



however, that "Daddy's back hurts all the time."

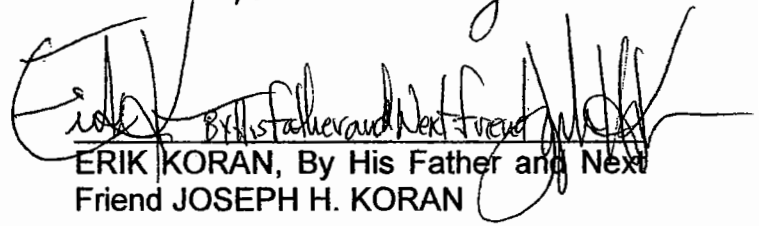
**INTERROGATORY 5.** Describe what actions You took, if any, upon learning about the Incident.

**ANSWER:** None.

**INTERROGATORY 6.** Please Identify all Communications You, or anyone acting on Your behalf, have had with the Defendant, Town of Sherborn, or any of its employees, agents or officials, concerning or in any way related to the Incidents alleged in the Complaint.

**ANSWER:** None.

Signed under the pains and penalties of perjury this 10<sup>th</sup> day of May, 2006.

  
ERIK KORAN, By His Father and Next Friend  
JOSEPH H. KORAN

CERTIFICATE OF SERVICE

I, Carmen L. Durso, attorney for plaintiffs, hereby certify that I served Plaintiff ERIK KORAN'S ANSWERS TO DEFENDANT TOWN OF SHERBORN'S INTERROGATORIES on the parties, by mailing a copy, postage prepaid, to John J. Cloherty, Esquire, Pierce, Davis & Perritano, LLP, 10 Winthrop Square, Boston, MA 02110 and to Dragan A. Cetkovic, Esquire, Black, Cetkovic & Whitestone, 200 Berkeley Street, Boston, MA 02116.

DATED: *July 12, 2006*

*Carmen L. Durso*  
CARMEN L. DURSO, ESQUIRE



**MOTION FOR SUMMARY JUDGMENT**

**EXHIBIT 16**

**Unreported Decision:**

**Goraj v. Nowak Funeral Home, Inc., 66  
Mass.App.Ct. 1102, 845 N.E.2d 450 (2006)**

Westlaw.

845 N.E.2d 450

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66 Mass.App.Ct. 1102, 845 N.E.2d 450, 2006 WL 959473 (Mass.App.Ct.)  
 (Cite as: 66 Mass.App.Ct. 1102, 845 N.E.2d 450)

Briefs and Other Related Documents

Goraj v. Nowak Funeral Home,  
 Inc. Mass.App.Ct., 2006. NOTICE: THIS IS AN  
 UNPUBLISHED OPINION.

Appeals Court of Massachusetts.  
 Delores A. GORAJ & another,<sup>FN1</sup>

FN1. Thomas W. Goraj.

v.

NOWAK FUNERAL HOME, INC.  
 No. 05-P-967.

April 13, 2006.

**Background:** Invitee at funeral home brought personal injury action against funeral home after fell on concrete ramp. The trial court entered judgment in favor of invitee, and denied funeral home's motions for directed verdict and for judgment notwithstanding the verdict. Funeral home appealed.

**Holding:** The Appeals Court held that concrete ramp at funeral home did not pose a danger or defect of which the funeral home knew or should have known.

Reversed.

**Negligence 272 ↪ 1110(1)**

272 Negligence

272XVII Premises Liability

272XVII(D) Breach of Duty

272k1100 Buildings and Structures

272k1110 Steps, Stairs and Ramps

272k1110(1) k. In General. Most

Cited Cases

Slope of concrete ramp at funeral home, either alone or in combination with the absence of a nonslip mat or hand railing, did not pose a danger

or defect of which the funeral home knew or should have known, precluding funeral home invitee from injuries incurred from a fall on the ramp; prior to invitee, no one had ever fallen on the ramp, and invitee herself had used ramp without falling.

MEMORANDUM AND ORDER PURSUANT TO  
 RULE 1:28

\*1 On appeal from a judgment in favor of the plaintiffs, the defendant contends that the judge erred in denying its motions for a directed verdict and for judgment n.o.v. We reverse, as we conclude that the plaintiffs presented insufficient evidence that the concrete ramp on which the plaintiff Delores A. Goraj fell constituted a dangerous condition or defect of the premises of which the defendant knew or should have known.<sup>FN2</sup>

FN2. Here the judge properly allowed the matter to go to the jury, following the "better procedure" prescribed for a case in which it is a close question whether the standard for granting a directed verdict is met. See *Soares v. Lakeville Baseball Camp, Inc.*, 369 Mass. 974, 975, 343 N.E.2d 840 (1976). Notwithstanding the respect rightfully accorded to a jury verdict, the verdict cannot stand because as matter of law the judge should have allowed the defendant's motion for judgment n.o.v.

In reviewing the denial of motions for directed verdict and for judgment n.o.v., we consider "whether 'anywhere in the evidence, from whatever source derived, any combination of circumstances could be found from which a reasonable inference could be drawn in favor of the plaintiff.'" *Poirier v. Plymouth*, 374 Mass. 206, 212, 372 N.E.2d 212 (1978), quoting from *Raunela v. Hertz Corp.*, 361 Mass. 341, 343, 280 N.E.2d 179 (1972). See

845 N.E.2d 450

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66 Mass.App.Ct. 1102, 845 N.E.2d 450, 2006 WL 959473 (Mass.App.Ct.)  
 (Cite as: 66 Mass.App.Ct. 1102, 845 N.E.2d 450)

*Forlano v. Hughes*, 393 Mass. 502, 504, 471 N.E.2d 1315 (1984). Even viewed under this generous standard, the plaintiffs failed to establish that the slope of the concrete ramp, either alone or in combination with the absence of a nonslip mat or hand railing, posed a danger or defect of which the defendant knew or should have known. Absent the existence of a defect of which it knew or should have known, the defendant may not be found negligent.<sup>FN3</sup> See *Oliveri v. Massachusetts Bay Transp. Authy.*, 363 Mass. 165, 167, 292 N.E.2d 863 (1973); *Davis v. Westwood Group*, 420 Mass. 739, 742-743, 652 N.E.2d 567 (1995).

FN3. Although the parties focus on whether any dangers posed by the ramp were "open and obvious," the inquiry more properly is whether there was a dangerous condition or defect in the premises of which the defendant knew or should have known. See *Greenslade v. Mohawk Park, Inc.*, 59 Mass.App.Ct. 850, 853, 798 N.E.2d 336 (2003) ("landowner has a duty to warn of any unreasonable danger of which the owner is or reasonably should have been aware"). Put differently, while the ramp's slope and lack of a nonslip mat or hand rail were readily apparent, whether these conditions are "open and obvious" dangers depends in the first instance on whether the conditions are defects or dangers of which the defendant knew or should have known. Liability in negligence does not attach unless the defect or danger is one of which the defendant knew or should have known.

An owner or possessor of land owes a common-law duty of reasonable care to all persons lawfully on the premises. See *Davis v. Westwood Group*, *supra*. This duty includes an obligation to maintain "his property in a reasonably safe condition in view of all the circumstances, including the likelihood of injury to others, the seriousness of the injury, and the burden of avoiding the risk." *Mounsey v. Ellard*, 363 Mass. 693, 708, 297 N.E.2d 43 (1973), quoting from *Smith v. Arbaugh's Restaurant, Inc.*, 469 F.2d 97, 100 (D.C.Cir.1972). However, a landowner is "

not obliged to supply a place of maximum safety, but only one which would be safe to a person who exercises such minimum care as the circumstances reasonably indicate." *Lyon v. Morphew*, 424 Mass. 828, 833, 678 N.E.2d 1306 (1997), quoting from *Toubiana v. Priestly*, 402 Mass. 84, 88, 520 N.E.2d 1307 (1988).

In the circumstances of this case, no rational view of the evidence would warrant a finding that the defendant knew or had reason to know that the slope of the ramp, either alone or in conjunction with the absence of a railing or mat, posed a danger to the few individuals using the ramp, including Mrs. Goraj, who was well aware of its slope and condition. There was no evidence that the slope of the ramp or the absence of a nonslip mat or hand rail, violated a statute or regulation, thereby imposing on the defendant constructive notice of any danger. See *Perry v. Medeiros*, 369 Mass. 836, 841, 343 N.E.2d 859 (1976); *Lindsey v. Massios*, 372 Mass. 79, 83, 360 N.E.2d 631 (1977). Nor was there any evidence, apart from Mrs. Goraj's fall, that the defendant knew or should have known that the ramp posed a danger to anyone using ordinary care. See *Barry v. Beverly Enterprises-Mass., Inc.*, 418 Mass. 590, 593-594, 638 N.E.2d 26 (1994) (defendant who had no actual or constructive knowledge of the allegedly hazardous condition cannot be found to have violated a duty of care). Prior to Mrs. Goraj's accident, no one ever had fallen on the ramp. (R. 176) Indeed, Mrs. Goraj herself had used the ramp on five prior occasions without incident, and her husband had used the ramp without difficulty only minutes before her fall.

\*2 The mere happening of an accident is not indicative of negligence. See *Rizzitelli v. Vestine*, 246 Mass. 391, 392, 141 N.E. 110 (1923); *Spano v. Wilson Tisdale Co.*, 361 Mass. 209, 212, 279 N.E.2d 725 (1972). Rather, for liability in negligence to attach there must be a failure by the defendant to use care to avoid a danger of which the defendant knew or should have known. See *Oliveri v. Massachusetts Bay Transp. Authy.*, 363 Mass. at 167, 292 N.E.2d 863. Unless a landowner knows or should know of the defect or dangerous condition, it cannot be found to have violated its duty of care. See *Barry v. Beverly Enterprises-Mass., Inc.*, 418



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Mass. at 593, 638 N.E.2d 26.

There was in this case neither expert testimony nor evidence from which a trier of fact, using common knowledge and experience, reasonably might conclude that the "mere occurrence of the accident shows negligence as a cause." *Enrich v. Windmere Corp.*, 416 Mass. 83, 88, 616 N.E.2d 1081 (1993). The testimony of the plaintiffs' expert, Clayton Rose, to the effect that the condition of the ramp amounted to a "defect" or "dangerous condition," provides an inadequate basis for concluding that the defendant knew or should have known of such a defect or danger. Rose's opinion that the thirty-two-degree slope of the ramp was "excessive" and that the ramp could have been safer with a railing or mat (R. 222-227) was predicated on no statute, regulation, or industry standard. Such untethered statements amount to no more than a personal view and fail to establish a standard of care of which it reasonably can be said the defendant knew or should have known and to which it need conform.

The order denying the motion for judgment n.o.v. is reversed. The judgment is reversed. Judgment shall enter for the defendant.  
*So ordered.*

Mass.App.Ct.,2006.  
 Goraj v. Nowak Funeral Home, Inc.  
 66 Mass.App.Ct. 1102, 845 N.E.2d 450, 2006 WL 959473 (Mass.App.Ct.)

Briefs and Other Related Documents (Back to top)

- 2005 WL 3441090 (Appellate Brief) Reply Brief for the Defendant/Appellant Nowak Funeral Home, Inc. (Oct. 5, 2005)
- 2005 WL 4678994 (Appellate Brief) Reply Brief for the Defendant/Appellant Nowak Funeral Home, Inc. (Oct. 5, 2005)
- 2005 WL 4678993 (Appellate Brief) Brief of Appellees, Delores Goraj and Thomas Goraj (Sep. 27, 2005)
- 2005 WL 2929023 (Appellate Brief) Brief for the Defendant/Appellant Nowak Funeral Home, Inc. (Jul. 28, 2005) Original Image of this Document

(PDF)

- 2005-P-0967 (Docket) (Jul. 5, 2005)
- 2005 WL 4678992 (Appellate Brief) Brief for the Defendant/Appellant Nowak Funeral Home, Inc. (Jun. 28, 2005)

END OF DOCUMENT